

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

UnitedHealth Group Incorporated PAC (United for Health)

ADDRESS (number and street) ▼

9900 Bren Road East

☐ Check if different than previously reported. (ACC)

Minnetonka

MN

55343

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00274431

3. IS THIS REPORT



NEW (N)

OR



AMENDED (A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15 Quarterly Report (Q1)

☐ July 15 Quarterly Report (Q2)

☐ October 15 Quarterly Report (Q3)

☒ January 31 Year-End Report (YE)

☐ July 31 Mid-Year Report (Non-election Year Only) (MY)

☐ Termination Report (TER)

(b) Monthly Report Due On:

☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11) (Non-Election Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12) (Non-Election Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day PRE-Election Report for the:

☐ Primary (12P)☐ General (12G)☐ Runoff (12R)☐ Convention (12C)☐ Special (12S)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y Y

in the State of

(d) 30-Day POST-Election Report for the:

☐ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y Y

in the State of

5. Covering Period

M M M /

D D D /

Y Y Y Y Y Y Y Y

through

M M M /

D D D /

Y Y Y Y Y Y Y Y

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Susan Sherwood

Signature of Treasurer

Susan Sherwood

[Electronically Filed]

Date

M M M /

D D D /

Y Y Y Y Y Y Y Y

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office
Use
Only

FEC FORM 3X
Rev. 12/2004

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

UnitedHealth Group Incorporated PAC (United for Health)

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y
07 / 01 / 2011 To: M M / D D / Y Y Y Y Y Y
12 / 31 / 2011

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, Y Y Y Y Y Y 2011		80071.92
(b) Cash on Hand at Beginning of Reporting Period.....	125136.76	
(c) Total Receipts (from Line 19)	308915.10	554379.94
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	434051.86	634451.86
7. Total Disbursements (from Line 31)	249994.00	450394.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	184057.86	184057.86
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

☒ This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

UnitedHealth Group Incorporated PAC (United for Health)

Report Covering the Period:

From:

M M / D D / Y Y Y Y Y
07 01 2011

To:

M M / D D / Y Y Y Y Y
12 31 2011

I. Receipts

COLUMN A
Total This Period

COLUMN B
Calendar Year-to-Date

11. Contributions (other than loans) From:

(a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

280434.05

482443.70

(ii) Unitemized

25981.05

58862.71

(iii) TOTAL (add

Lines 11(a)(i) and (ii)..... ▶

306415.10

541306.41

(b) Political Party Committees

0.00

0.00

(c) Other Political Committees

(such as PACs).....

0.00

0.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5)

306415.10

541306.41

12. Transfers From Affiliated/Other

Party Committees.....

0.00

10573.53

13. All Loans Received

0.00

0.00

14. Loan Repayments Received.....

0.00

0.00

15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

0.00

0.00

16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

2500.00

2500.00

17. Other Federal Receipts

(Dividends, Interest, etc.).....

0.00

0.00

18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3)

0.00

0.00

(b) Levin Funds (from Schedule H5)

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

0.00

0.00

19. Total Receipts (add Lines 11(d),
12, 13, 14, 15, 16, 17, and 18(c))..... ▶

308915.10

554379.94

20. Total Federal Receipts

(subtract Line 18(c) from Line 19)

308915.10

554379.94

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	152500.00	329000.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	5000.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	5000.00
29. Other Disbursements	97494.00	116394.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	249994.00	450394.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	249994.00	450394.00

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	306415.10	541306.41
34. Total Contribution Refunds (from Line 28(d))	0.00	5000.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	306415.10	536306.41
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ►	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) ►	0.00	0.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. Alice Ferreira

Mailing Address 18 Brittany Avenue

City

Trumbull

State

CT

Zip Code

06611-1105

FEC ID number of contributing
federal political committee.

C

Name of Employer

UnitedHealth Group, Inc.

Occupation

Vice President, Communication

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

365.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 28 / 2011

Transaction ID : 33608873

Amount of Each Receipt this Period

365.00

Full Name (Last, First, Middle Initial)

B. Charles Thompson

Mailing Address 5217 EDGEWOOD ROAD

City

Little Rock

State

AR

Zip Code

72207-5413

FEC ID number of contributing
federal political committee.

C

Name of Employer

UnitedHealth Group, Inc.

Occupation

VP Regulatory Affairs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 12 / 2011

Transaction ID : 33754431

Amount of Each Receipt this Period

2500.00

Full Name (Last, First, Middle Initial)

C. PATRICIA R SAURO

Mailing Address 8943 HIDDEN MEADOW R

City

WOODBURY

State

MN

Zip Code

55125

FEC ID number of contributing
federal political committee.

C

Name of Employer

United HealthCare Services Inc

Occupation

Business Segment CAO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1840.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 26 / 2011

Transaction ID : 33944156

Amount of Each Receipt this Period

1060.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

3925.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. Thomas Kunst

Mailing Address 4872 103RD STREET

City State Zip Code
 PLEASANT PRAIRIE WI 53158-6516

FEC ID number of contributing
federal political committee.

C

Name of Employer
 UnitedHealth Group, Inc.

Occupation
 KA VP Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 12 / 02 / 2011

Transaction ID : 34067764

Amount of Each Receipt this Period

400.00

Full Name (Last, First, Middle Initial)

B. Mr. Abram McCabe

Mailing Address 1320 Martha Washington Drive

City State Zip Code
 Wauwatosa WI 53213-2944

FEC ID number of contributing
federal political committee.

C

Name of Employer
 UnitedHealth Group, Inc.

Occupation
 Director of Account Management

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 12 / 20 / 2011

Transaction ID : 34146017

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

C. Bruce Weiss

Mailing Address 7425 N BEACH COURT

City State Zip Code
 FOX POINT WI 53217-3656

FEC ID number of contributing
federal political committee.

C

Name of Employer
 UnitedHealth Group, Inc.

Occupation
 Sr Medical Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 12 / 01 / 2011

Transaction ID : 34275158

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1200.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. MOLLIE CHAPMAN

Mailing Address 226 BERNARD DR

City State Zip Code
 MONROE OH 45050

FEC ID number of contributing federal political committee.

C

Name of Employer

United HealthCare Services Inc

Occupation

Assoc Dir Network Contracting

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 12 31 2011

Transaction ID : PR1159790526946

Amount of Each Receipt this Period

130.00

P/R Deduction (\$10.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. KEN L HOVERMAN

Mailing Address 16221 SIERRA DE AVILA

City State Zip Code
 TAMPA FL 33613

FEC ID number of contributing federal political committee.

C

Name of Employer

United HealthCare Services Inc

Occupation

VP Marketing

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 12 31 2011

Transaction ID : PR1159790926946

Amount of Each Receipt this Period

130.00

P/R Deduction (\$10.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. PAMELA A TULUMELLO

Mailing Address 17715 N 68TH DRIVE

City State Zip Code
 GLENDALE AZ 85308

FEC ID number of contributing federal political committee.

C

Name of Employer

United HealthCare Services Inc

Occupation

Dir Claims Quality

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 12 31 2011

Transaction ID : PR1159793126946

Amount of Each Receipt this Period

130.00

P/R Deduction (\$10.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

390.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. DEBORAH S STREB

Mailing Address 2201 NORTH STAR ROAD

City State Zip Code
 UPPER ARLINGTON OH 43221

FEC ID number of contributing
federal political committee.

C

Name of Employer
 United HealthCare Services Inc

Occupation
 Dir Project Management

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

316.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 12 31 2011

Transaction ID : PR1159794126946

Amount of Each Receipt this Period

182.00

P/R Deduction (\$14.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. ANTHONY J KAZLAUSKAS

Mailing Address 11 CARNIVAL TERRACE

City State Zip Code
 WEST WARWICK RI 02893

FEC ID number of contributing
federal political committee.

C

Name of Employer
 United HealthCare Services Inc

Occupation
 Sr Medical Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

520.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 12 31 2011

Transaction ID : PR1159794626946

Amount of Each Receipt this Period

260.00

P/R Deduction (\$20.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. CARLA M MUGGIO

Mailing Address 3533 FAIR OAKS LANE

City State Zip Code
 LONGBOAT KEY FL 34228

FEC ID number of contributing
federal political committee.

C

Name of Employer
 United HealthCare Services Inc

Occupation
 Network Contract Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.75

Date of Receipt

M M / D D / Y Y Y Y Y Y
 12 31 2011

Transaction ID : PR1159798226946

Amount of Each Receipt this Period

230.76

P/R Deduction (\$19.23 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

672.76

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. BRIAN R BELLOWS

Mailing Address 10 SHADOWOOD LANE

City State Zip Code
 TRUMBULL CT 06611

FEC ID number of contributing federal political committee.

C

Name of Employer

United HealthCare Services Inc

Occupation

Dir Bus Dvlp

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

390.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 12 31 2011

Transaction ID : PR1159803826946

Amount of Each Receipt this Period

195.00

P/R Deduction (\$15.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. KEITH W NOBLITT

Mailing Address 122 SOUTH OAK POINTE DR

City State Zip Code
 SENECA SC 29672

FEC ID number of contributing federal political committee.

C

Name of Employer

United HealthCare Services Inc

Occupation

SCE 3 - Natl Accts Indiv Contr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

520.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 12 31 2011

Transaction ID : PR1159805526946

Amount of Each Receipt this Period

260.00

P/R Deduction (\$20.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. JAMES S ELLISTON

Mailing Address 302 S 52ND ST

City State Zip Code
 OMAHA NE 68132

FEC ID number of contributing federal political committee.

C

Name of Employer

United HealthCare Services Inc

Occupation

Dir Finance

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 12 31 2011

Transaction ID : PR1159805926946

Amount of Each Receipt this Period

130.00

P/R Deduction (\$10.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

585.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. JAMES S WATSON III

Mailing Address 6520 SHENANDOAH DR

City
LINCOLN

State Zip Code
NE 68510

FEC ID number of contributing
federal political committee.

C

Name of Employer

United HealthCare Services Inc

Occupation

Associate General Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 31 2011

Transaction ID : PR1159806026946

Amount of Each Receipt this Period

325.00

P/R Deduction (\$25.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. MARILYN C NEVIN

Mailing Address 4336 BROWDALE

City

SAINT LOUIS PARK

State Zip Code
MN 55424

FEC ID number of contributing
federal political committee.

C

Name of Employer

United HealthCare Services Inc

Occupation

VP Finance

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 31 2011

Transaction ID : PR1159807426946

Amount of Each Receipt this Period

130.00

P/R Deduction (\$10.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. WILLIAM P WHITELEY

Mailing Address 2657 WOODBRIDGE RD

City

WAYZATA

State Zip Code
MN 55391

FEC ID number of contributing
federal political committee.

C

Name of Employer

United HealthCare Services Inc

Occupation

Senior Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4999.80

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 31 2011

Transaction ID : PR1159812626946

Amount of Each Receipt this Period

2499.90

P/R Deduction (\$192.30 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

2954.90

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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FOR LINE NUMBER:
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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. WAYNE F COOK

Mailing Address 1200 PEBBLE HILL ROAD

City State Zip Code
 DOYLESTOWN PA 18901

FEC ID number of contributing
federal political committee.

C

Name of Employer

United HealthCare Services Inc

Occupation

VP Operations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1560.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 12 31 2011

Transaction ID : PR1159812826946

Amount of Each Receipt this Period

780.00

P/R Deduction (\$60.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. DAVID S WICHMANN

Mailing Address 7000 ANTRIM ROAD

City State Zip Code
 EDINA MN 55439

FEC ID number of contributing
federal political committee.

C

Name of Employer

United HealthCare Services Inc

Occupation

EVP & Pres UHG Operations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4999.80

Date of Receipt

M M / D D / Y Y Y Y Y Y
 12 31 2011

Transaction ID : PR1159814726946

Amount of Each Receipt this Period

2499.90

P/R Deduction (\$192.30 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. PATRICK J ERLANDSON

Mailing Address 1000 OLD LONG LAKE ROAD

City State Zip Code
 WAYZATA MN 55391

FEC ID number of contributing
federal political committee.

C

Name of Employer

United HealthCare Services Inc

Occupation

SVP Business Operations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4999.80

Date of Receipt

M M / D D / Y Y Y Y Y Y
 12 31 2011

Transaction ID : PR1159815926946

Amount of Each Receipt this Period

2499.90

P/R Deduction (\$192.30 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

5779.80

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. PATRICIA R SAURO

Mailing Address 8943 HIDDEN MEADOW R

City State Zip Code
 WOODBURY MN 55125

FEC ID number of contributing
federal political committee.

C

Name of Employer
United HealthCare Services Inc

Occupation
Business Segment CAO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2620.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 12 31 2011

Transaction ID : PR1159816426946

Amount of Each Receipt this Period

780.00

P/R Deduction (\$60.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. WILLIAM A MUNSELL

Mailing Address 2119 WINDSONG CIRCLE

City State Zip Code
 WAYZATA MN 55391

FEC ID number of contributing
federal political committee.

C

Name of Employer
United HealthCare Services Inc

Occupation
EVP UnitedHealth Group

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 12 31 2011

Transaction ID : PR1159816626946

Amount of Each Receipt this Period

1300.00

P/R Deduction (\$100.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. JOHN S PENSHORN

Mailing Address 120 BLACK OAKS LANE

City State Zip Code
 WAYZATA MN 55391

FEC ID number of contributing
federal political committee.

C

Name of Employer
United HealthCare Services Inc

Occupation
SVP UnitedHealth Group

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4999.80

Date of Receipt

M M / D D / Y Y Y Y Y Y
 12 31 2011

Transaction ID : PR1159816926946

Amount of Each Receipt this Period

2499.90

P/R Deduction (\$192.30 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

4579.90

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. PAUL D KALLMEYER

Mailing Address 468 HERALD DR

City

AMBLER

State

PA

Zip Code

19002

FEC ID number of contributing
federal political committee.

C

Name of Employer

United HealthCare Services Inc

Occupation

Deputy General Counsel (Mgr)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 31 / 2011

Transaction ID : PR1159817426946

Amount of Each Receipt this Period

650.00

P/R Deduction (\$50.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. TIMOTHY F RYAN

Mailing Address 4913 BRUCE AVE

City

EDINA

State

MN

Zip Code

55424

FEC ID number of contributing
federal political committee.

C

Name of Employer

United HealthCare Services Inc

Occupation

Business Segment Gen Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

494.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 31 / 2011

Transaction ID : PR1159817926946

Amount of Each Receipt this Period

247.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. THOMAS J QUIRK

Mailing Address 4307 BEECHWOOD LANE

City

DALLAS

State

TX

Zip Code

75220

FEC ID number of contributing
federal political committee.

C

Name of Employer

United HealthCare Services Inc

Occupation

Health Plan CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1700.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 31 / 2011

Transaction ID : PR1159819126946

Amount of Each Receipt this Period

650.00

P/R Deduction (\$50.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

1547.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. REED V TUCKSON M.D.

Mailing Address 3501 ZENITH AVE SOUTH

City
MINNEAPOLIS

State Zip Code
MN 55416

FEC ID number of contributing
federal political committee.

C

Name of Employer
United HealthCare Services Inc

Occupation
EVP Consumr Health & Med Care

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2999.88

Date of Receipt

M M / D D / Y Y Y Y Y
12 31 2011

Transaction ID : PR1159819826946

Amount of Each Receipt this Period

1499.94

P/R Deduction (\$115.38 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. DAVID J FALK

Mailing Address 323 LAWRENCE AVE

City
HIGHLAND PARK

State Zip Code
NJ 08904

FEC ID number of contributing
federal political committee.

C

Name of Employer
United HealthCare Services Inc

Occupation
Medical Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

346.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 31 2011

Transaction ID : PR1159820226946

Amount of Each Receipt this Period

182.00

P/R Deduction (\$14.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. WILLIAM C TRACY

Mailing Address 13016 CANTERBURY

City
LEAWOOD

State Zip Code
KS 66209

FEC ID number of contributing
federal political committee.

C

Name of Employer
United HealthCare Services Inc

Occupation
Health Plan CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.20

Date of Receipt

M M / D D / Y Y Y Y Y
12 31 2011

Transaction ID : PR1159821526946

Amount of Each Receipt this Period

750.10

P/R Deduction (\$57.70 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

2432.04

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. MICHAEL M HAWKINS

Mailing Address 11137 AMESITE TRAIL

City State Zip Code
 AUSTIN TX 78726

FEC ID number of contributing
federal political committee.

C

Name of Employer

United HealthCare Services Inc

Occupation

Sr Medical Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.04

Date of Receipt

M M / D D / Y Y Y Y Y Y
 12 31 2011

Transaction ID : PR1159822026946

Amount of Each Receipt this Period

150.02

P/R Deduction (\$11.54 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. CAROL M SCHNEEWEIS

Mailing Address 16907 49TH PLACE N

City State Zip Code
 PLYMOUTH MN 55446

FEC ID number of contributing
federal political committee.

C

Name of Employer

United HealthCare Services Inc

Occupation

Dir Product

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 12 31 2011

Transaction ID : PR1159823526946

Amount of Each Receipt this Period

325.00

P/R Deduction (\$25.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. RUSSELL M HOSTETLER

Mailing Address 6016 MARINERS WATCH DR

City State Zip Code
 TAMPA FL 33615

FEC ID number of contributing
federal political committee.

C

Name of Employer

United HealthCare Services Inc

Occupation

Medical Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

365.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 12 31 2011

Transaction ID : PR1159826326946

Amount of Each Receipt this Period

365.00

P/R Deduction (\$365.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

840.02

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. RICHARD J MIGLIORI

Mailing Address PO BOX 72

City

WAYZATA

State

MN

Zip Code

55391

FEC ID number of contributing
federal political committee.

C

Name of Employer

United HealthCare Services Inc

Occupation

SVP Bus Initiatives & Clin Aff

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

2276.88

Date of Receipt

M M / D D / Y Y Y Y Y Y
 12 / 31 / 2011

Transaction ID : PR1159827426946

Amount of Each Receipt this Period

1276.92

P/R Deduction (\$100.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. BARBARA C BUENEMANN

Mailing Address 128 ROSEBROOK DR

City

FLORISSANT

State

MO

Zip Code

63031

FEC ID number of contributing
federal political committee.

C

Name of Employer

United HealthCare Services Inc

Occupation

Dir Customer Service

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

300.04

Date of Receipt

M M / D D / Y Y Y Y Y Y
 12 / 31 / 2011

Transaction ID : PR1159828726946

Amount of Each Receipt this Period

150.02

P/R Deduction (\$11.54 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. JEANNINE M RIVET

Mailing Address 4305 TRILLIUM WAY

City

MINNETRISTA

State

MN

Zip Code

55364

FEC ID number of contributing
federal political committee.

C

Name of Employer

United HealthCare Services Inc

Occupation

EVP UnitedHealth Group

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

4999.80

Date of Receipt

M M / D D / Y Y Y Y Y Y
 12 / 31 / 2011

Transaction ID : PR1159830026946

Amount of Each Receipt this Period

2499.90

P/R Deduction (\$192.30 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

3926.84

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. JACK E SHUFF

Mailing Address 923 CONSTANCE STREET
 APT #112

City State Zip Code
 NEW ORLEANS LA 70130

FEC ID number of contributing
 federal political committee.

C

Name of Employer

United HealthCare Services Inc

Occupation

SB RVP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

776.76

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 12 31 2011

Transaction ID : PR1159830526946

Amount of Each Receipt this Period

507.00

P/R Deduction (\$39.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. JOHN F STEVENSON

Mailing Address 5 BARBERRY DRIVE

City State Zip Code
 BURLINGTON CT 06013

FEC ID number of contributing
 federal political committee.

C

Name of Employer

United HealthCare Services Inc

Occupation

Sr Associate General Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

254.80

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 12 31 2011

Transaction ID : PR1159839326946

Amount of Each Receipt this Period

127.40

P/R Deduction (\$9.80 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. JILL WINTERS

Mailing Address 16 SPOEDE LN

City State Zip Code
 SAINT LOUIS MO 63141

FEC ID number of contributing
 federal political committee.

C

Name of Employer

United HealthCare Services Inc

Occupation

VP Operations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1404.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 12 31 2011

Transaction ID : PR1159840426946

Amount of Each Receipt this Period

702.00

P/R Deduction (\$54.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

1336.40

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. Mr. ANTHONY WELTERS

Mailing Address 919 SAIGON ROAD

City State Zip Code
 MCLEAN VA 22102

FEC ID number of contributing federal political committee.

C

Name of Employer

United HealthCare Services Inc

Occupation

EVP UnitedHealth Group

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4999.80

Date of Receipt

M M / D D / Y Y Y Y Y
 12 31 2011

Transaction ID : PR1332013226946

Amount of Each Receipt this Period

2499.90

P/R Deduction (\$192.30 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. MICHAEL J BRESOLIN

Mailing Address 121 W VIEW STREET

City State Zip Code
 LOMBARD IL 60148

FEC ID number of contributing federal political committee.

C

Name of Employer

United HealthCare Services Inc

Occupation

Dir Care Advocacy

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

520.00

Date of Receipt

M M / D D / Y Y Y Y Y
 12 31 2011

Transaction ID : PR1551005726946

Amount of Each Receipt this Period

260.00

P/R Deduction (\$20.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. RITA T T DONOVAN

Mailing Address 1585 NW 124TH STREET

City State Zip Code
 CLIVE IA 50325

FEC ID number of contributing federal political committee.

C

Name of Employer

United HealthCare Services Inc

Occupation

Dir Network Contracting

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

207.63

Date of Receipt

M M / D D / Y Y Y Y Y
 12 31 2011

Transaction ID : PR1551006626946

Amount of Each Receipt this Period

99.97

P/R Deduction (\$7.69 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

2859.87

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. TIMOTHY J HEADY

Mailing Address 19019 VOGEL FARM TRAIL

City

EDEN PRAIRIE

State

MN

Zip Code

55347

FEC ID number of contributing
federal political committee.

C

Name of Employer

United HealthCare Services Inc

Occupation

SVP Pharmacy Benefit Mgmt

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1950.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 31 / 2011

Transaction ID : PR1551122526946

Amount of Each Receipt this Period

975.00

P/R Deduction (\$75.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. CHRISTOPHER R HOCK

Mailing Address 215 WINDMILL HILL

City

WETHERSFIELD

State

CT

Zip Code

06109

FEC ID number of contributing
federal political committee.

C

Name of Employer

United HealthCare Services Inc

Occupation

Dir General Management

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.04

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 31 / 2011

Transaction ID : PR1551128926946

Amount of Each Receipt this Period

150.02

P/R Deduction (\$11.54 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. JEFFREY W KAGAN

Mailing Address 52 CRESTWOOD LANE

City

FARMINGVILLE

State

NY

Zip Code

11738

FEC ID number of contributing
federal political committee.

C

Name of Employer

United HealthCare Services Inc

Occupation

VP Product

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

520.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 31 / 2011

Transaction ID : PR1551132326946

Amount of Each Receipt this Period

260.00

P/R Deduction (\$20.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1385.02

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. GERALD JOHN KNUTSON

Mailing Address 520 KIMBERLY LN N

City
PLYMOUTHState Zip Code
MN 55447FEC ID number of contributing
federal political committee.

C

Name of Employer

United HealthCare Services Inc

Occupation

Business Segment CFO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

520.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	31	/	2011

Transaction ID : PR1551132526946

Amount of Each Receipt this Period

260.00

P/R Deduction (\$20.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. MICHAEL C MATTEO

Mailing Address 25 JEREMIAHS WAY

City
SOUTH GLASTONBURYState Zip Code
CT 06073FEC ID number of contributing
federal political committee.

C

Name of Employer

United HealthCare Services Inc

Occupation

CEO National Accounts

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

499.98

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	31	/	2011

Transaction ID : PR1551133426946

Amount of Each Receipt this Period

249.99

P/R Deduction (\$19.23 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. DAWN M OWENS

Mailing Address 2119 E LAKE OF THE ISLES PKWY

City
MINNEAPOLISState Zip Code
MN 55405FEC ID number of contributing
federal political committee.

C

Name of Employer

United HealthCare Services Inc

Occupation

Business Segment CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	31	/	2011

Transaction ID : PR1551160326946

Amount of Each Receipt this Period

1300.00

P/R Deduction (\$100.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

1809.99

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. ERIKA A ROGERS

Mailing Address 2449 GUYNN AVENUE

City State Zip Code
 CHICO CA 95926

FEC ID number of contributing
federal political committee.

C

Name of Employer
 United HealthCare Services Inc

Occupation
 SCE 2 - National Accts

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 12 31 2011

Transaction ID : PR1551160726946

Amount of Each Receipt this Period

130.00

P/R Deduction (\$10.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. THOMAS J VALERIUS

Mailing Address 2820 DEER RUN TRAIL

City State Zip Code
 LONG LAKE MN 55356

FEC ID number of contributing
federal political committee.

C

Name of Employer
 United HealthCare Services Inc

Occupation
 SVP Recruitment Svcs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1999.92

Date of Receipt

M M / D D / Y Y Y Y Y Y
 12 31 2011

Transaction ID : PR1551161326946

Amount of Each Receipt this Period

999.96

P/R Deduction (\$76.92 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. LOIS T WEIHRAUCH

Mailing Address 10392 SHERMAN DRIVE

City State Zip Code
 EDEN PRAIRIE MN 55347

FEC ID number of contributing
federal political committee.

C

Name of Employer
 United HealthCare Services Inc

Occupation
 VP General Management

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1488.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 12 31 2011

Transaction ID : PR1551161426946

Amount of Each Receipt this Period

780.00

P/R Deduction (\$60.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1909.96

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. JOHN O ENDERLE

Mailing Address 31 ANDREIS TRAIL

City State Zip Code
 SOUTH WINDSOR CT 06074

FEC ID number of contributing federal political committee.

C

Name of Employer

United HealthCare Services Inc

Occupation

Regional Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1795.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 12 31 2011

Transaction ID : PR1554323526946

Amount of Each Receipt this Period

715.00

P/R Deduction (\$55.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. CHRISTINE MCCARTNEY HARRIS

Mailing Address 25 JUSTIN LANE

City State Zip Code
 WETHERSFIELD CT 06109

FEC ID number of contributing federal political committee.

C

Name of Employer

United HealthCare Services Inc

Occupation

Dir Claims

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 12 31 2011

Transaction ID : PR1554323626946

Amount of Each Receipt this Period

130.00

P/R Deduction (\$10.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. RICK M JELINEK

Mailing Address 5570 WOODSIDE LANE

City State Zip Code
 SHOREWOOD MN 55331

FEC ID number of contributing federal political committee.

C

Name of Employer

United HealthCare Services Inc

Occupation

Business Segment CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4999.80

Date of Receipt

M M / D D / Y Y Y Y Y Y
 12 31 2011

Transaction ID : PR1554323926946

Amount of Each Receipt this Period

2499.90

P/R Deduction (\$192.30 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

3344.90

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Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. MICHAEL RADU

Mailing Address 42820 VIOLA CT

City
LEESBURG

State Zip Code
VA 20176

FEC ID number of contributing
federal political committee.

C

Name of Employer
United HealthCare Services Inc

Occupation
COO Collaborative Care

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1404.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 31 2011

Transaction ID : PR1554324526946

Amount of Each Receipt this Period

702.00

P/R Deduction (\$54.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. CATHERINE E SPILLANE

Mailing Address 3807 PLEASANT VALLEY DRIVE

City
MISSOURI CITY

State Zip Code
TX 77459

FEC ID number of contributing
federal political committee.

C

Name of Employer
United HealthCare Services Inc

Occupation
Dir Business Process

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

499.98

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 31 2011

Transaction ID : PR1554324626946

Amount of Each Receipt this Period

249.99

P/R Deduction (\$19.23 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. KIRK E STAPLETON

Mailing Address 3840 INGLEWOOD AVE S

City
SAINT LOUIS PARK

State Zip Code
MN 55416

FEC ID number of contributing
federal political committee.

C

Name of Employer
United HealthCare Services Inc

Occupation
VP Strategic Initiatives

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 31 2011

Transaction ID : PR1554324726946

Amount of Each Receipt this Period

650.00

P/R Deduction (\$50.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1601.99

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. KAREN L ERICKSON

Mailing Address 15348 RED OAKS ROAD SE

City
PRIOR LAKE

State Zip Code
MN 55372

FEC ID number of contributing
federal political committee.

C

Name of Employer
United HealthCare Services Inc

Occupation
Market Group CAO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4999.80

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 31 2011

Transaction ID : PR1575957626946

Amount of Each Receipt this Period

2499.90

P/R Deduction (\$192.30 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. ERNEST MONFILETTO

Mailing Address 3062 COMFORT ROAD

City
NEW HOPE

State Zip Code
PA 18938

FEC ID number of contributing
federal political committee.

C

Name of Employer
United HealthCare Services Inc

Occupation
Plan President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1999.92

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 31 2011

Transaction ID : PR1575958126946

Amount of Each Receipt this Period

999.96

P/R Deduction (\$76.92 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. LEE D VALENTA

Mailing Address 4701 GOLF TERRACE

City
EDINA

State Zip Code
MN 55424

FEC ID number of contributing
federal political committee.

C

Name of Employer
United HealthCare Services Inc

Occupation
President Life Sciences

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4999.80

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 31 2011

Transaction ID : PR1575958526946

Amount of Each Receipt this Period

2499.90

P/R Deduction (\$192.30 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

5999.76

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. JOHN W KELLY

Mailing Address MN

568 HAWTHORNE WOODS DRIVE

City

EAGAN

State

MN

Zip Code

55123-3059

FEC ID number of contributing
federal political committee.

C

Name of Employer

UnitedHealth Group, Inc.

Occupation

United HealthCare Services Inc

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 31 / 2011

Transaction ID : PR1575959726946

Amount of Each Receipt this Period

1000.00

P/R Deduction (\$1000.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. DAVID B OSTLER

Mailing Address APARTMENT 535

410 SOUTH MAPLE AVENUE

City

FALLS CHURCH

State

VA

Zip Code

22046

FEC ID number of contributing
federal political committee.

C

Name of Employer

United HealthCare Services Inc

Occupation

SVP IBS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 31 / 2011

Transaction ID : PR1580864626946

Amount of Each Receipt this Period

120.00

P/R Deduction (\$0.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. THOMAS S PAUL

Mailing Address 2006 QUEEN AVENUE SOUTH

City

MINNEAPOLIS

State

MN

Zip Code

55405

FEC ID number of contributing
federal political committee.

C

Name of Employer

United HealthCare Services Inc

Occupation

Business Segment CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 31 / 2011

Transaction ID : PR1580864726946

Amount of Each Receipt this Period

1300.00

P/R Deduction (\$100.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

2420.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. ROBERT THOMAS WEBB

Mailing Address 4516 DREXEL AVENUE

City State Zip Code
 EDINA MN 55424

FEC ID number of contributing federal political committee.

C

Name of Employer

United HealthCare Services Inc

Occupation

CEO Care Solutions

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4999.80

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 12 31 2011

Transaction ID : PR1580865326946

Amount of Each Receipt this Period

2499.90

P/R Deduction (\$192.30 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. RICHARD J HUGHES

Mailing Address 735 SAINT MORITZ

City State Zip Code
 VICTORIA MN 55386

FEC ID number of contributing federal political committee.

C

Name of Employer

United HealthCare Services Inc

Occupation

SVP Human Capital Dvlpmnt

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2600.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 12 31 2011

Transaction ID : PR1596304126946

Amount of Each Receipt this Period

1300.00

P/R Deduction (\$100.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. THAD C JOHNSON

Mailing Address 16848 STIRRUP LN

City State Zip Code
 EDEN PRAIRIE MN 55347

FEC ID number of contributing federal political committee.

C

Name of Employer

United HealthCare Services Inc

Occupation

Market Group General Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 12 31 2011

Transaction ID : PR1596304326946

Amount of Each Receipt this Period

600.00

P/R Deduction (\$100.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

4399.90

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. JOHN KING

Mailing Address 1 EDEN HILL LANE

City State Zip Code
 SOUTHWICK MA 01077

FEC ID number of contributing federal political committee.

C

Name of Employer

United HealthCare Services Inc

Occupation

VP Sales - National Accts

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 12 31 2011

Transaction ID : PR1596304426946

Amount of Each Receipt this Period

130.00

P/R Deduction (\$10.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. GAYE ADAMS MASSEY

Mailing Address 11641 TANGLEWOOD DRIVE

City State Zip Code
 EDEN PRAIRIE MN 55347

FEC ID number of contributing federal political committee.

C

Name of Employer

United HealthCare Services Inc

Occupation

Sr Deputy General Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2999.88

Date of Receipt

M M / D D / Y Y Y Y Y Y
 12 31 2011

Transaction ID : PR1596304526946

Amount of Each Receipt this Period

1499.94

P/R Deduction (\$115.38 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. JAY S MATUSHAK

Mailing Address 9346 SHETLAND ROAD

City State Zip Code
 EDEN PRAIRIE MN 55347

FEC ID number of contributing federal political committee.

C

Name of Employer

United HealthCare Services Inc

Occupation

VP Finance

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

332.02

Date of Receipt

M M / D D / Y Y Y Y Y Y
 12 31 2011

Transaction ID : PR1596304626946

Amount of Each Receipt this Period

182.00

P/R Deduction (\$14.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

1811.94

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. GEORGE L MIKAN III

Mailing Address 4901 ROLLING GREEN PARKWAY

City State Zip Code
 EDINA MN 55436

FEC ID number of contributing federal political committee.

C

Name of Employer

United HealthCare Services Inc

Occupation

EVP UnitedHealth Group

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4999.80

Date of Receipt

M M / D D / Y Y Y Y Y Y
 12 31 2011

Transaction ID : PR1596304826946

Amount of Each Receipt this Period

2499.90

P/R Deduction (\$192.30 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. CAROL B MORNESS

Mailing Address 401 N 2ND ST UNIT 512

City State Zip Code
 MINNEAPOLIS MN 55401

FEC ID number of contributing federal political committee.

C

Name of Employer

United HealthCare Services Inc

Occupation

Dir Underwriting

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

999.96

Date of Receipt

M M / D D / Y Y Y Y Y Y
 12 31 2011

Transaction ID : PR1596304926946

Amount of Each Receipt this Period

499.98

P/R Deduction (\$38.46 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. SCOTT E THEISEN

Mailing Address 1950 MEADOWWOODS TRAIL

City State Zip Code
 LONG LAKE MN 55356

FEC ID number of contributing federal political committee.

C

Name of Employer

United HealthCare Services Inc

Occupation

Business Segment CFO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

499.98

Date of Receipt

M M / D D / Y Y Y Y Y Y
 12 31 2011

Transaction ID : PR1596305626946

Amount of Each Receipt this Period

249.99

P/R Deduction (\$19.23 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

3249.87

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. THOMAS D LEWIS

Mailing Address 306 CHIPPEWA AVENUE

City
TAMPA

State Zip Code
FL 33606

FEC ID number of contributing
federal political committee.

C

Name of Employer

United HealthCare Services Inc

Occupation

Health Plan CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

999.96

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 31 2011

Transaction ID : PR1596306926946

Amount of Each Receipt this Period

499.98

P/R Deduction (\$38.46 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. ROBERT W OBERRENDER

Mailing Address 4505 MOORLAND AVENUE

City
EDINA

State Zip Code
MN 55424

FEC ID number of contributing
federal political committee.

C

Name of Employer

United HealthCare Services Inc

Occupation

SVP Treasurer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2860.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 31 2011

Transaction ID : PR1596307026946

Amount of Each Receipt this Period

1430.00

P/R Deduction (\$110.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. MICHAEL J ANDERSON

Mailing Address 17907 INVERNESS CURVE

City
EDEN PRAIRIE

State Zip Code
MN 55347

FEC ID number of contributing
federal political committee.

C

Name of Employer

United HealthCare Services Inc

Occupation

Dir Medical & Clinical Ops

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

211.75

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 31 2011

Transaction ID : PR1596309326946

Amount of Each Receipt this Period

161.70

P/R Deduction (\$14.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

2091.68

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. DIANE BEDNAR FLYNN

Mailing Address 3318 FOXRIDGE CIRCLE

City
TAMPA

State Zip Code
FL 33618

FEC ID number of contributing
federal political committee.

C

Name of Employer

United HealthCare Services Inc

Occupation

VP Medical & Clinical Ops

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

720.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 31 2011

Transaction ID : PR1596309726946

Amount of Each Receipt this Period

395.00

P/R Deduction (\$39.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. LISA M BEHNKE

Mailing Address 9224 ASTONIA WAY

City

FORT MYERS

State Zip Code
FL 33967

FEC ID number of contributing
federal political committee.

C

Name of Employer

United HealthCare Services Inc

Occupation

Medical Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

546.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 31 2011

Transaction ID : PR1596309826946

Amount of Each Receipt this Period

507.00

P/R Deduction (\$39.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. RAMON E COTO

Mailing Address 14021 LEANING PINE DRIVE

City

MIAMI LAKES

State Zip Code
FL 33014

FEC ID number of contributing
federal political committee.

C

Name of Employer

United HealthCare Services Inc

Occupation

VP General Management

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

499.98

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 31 2011

Transaction ID : PR1596311526946

Amount of Each Receipt this Period

249.99

P/R Deduction (\$19.23 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1151.99

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. JEFFREY P DOOLEY

Mailing Address 306 W MEADOWS LANE

City
DANVILLE

State Zip Code
CA 94506

FEC ID number of contributing
federal political committee.

C

Name of Employer

United HealthCare Services Inc

Occupation

KA VP Sales and Account Mgmt

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.04

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 31 2011

Transaction ID : PR1596312126946

Amount of Each Receipt this Period

150.02

P/R Deduction (\$11.54 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. RICHARD G DUNLOP

Mailing Address 2964 WYSE COURT

City
LEWIS CENTER

State Zip Code
OH 43035

FEC ID number of contributing
federal political committee.

C

Name of Employer

United HealthCare Services Inc

Occupation

VP General Management

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 31 2011

Transaction ID : PR1596312326946

Amount of Each Receipt this Period

130.00

P/R Deduction (\$10.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. STEVAN D GARCIA

Mailing Address 4675 DELAWARE DRIVE

City
LARKSPUR

State Zip Code
CO 80118

FEC ID number of contributing
federal political committee.

C

Name of Employer

United HealthCare Services Inc

Occupation

SVP Operations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

499.98

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 31 2011

Transaction ID : PR1596312926946

Amount of Each Receipt this Period

249.99

P/R Deduction (\$19.23 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

530.01

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. JOSEPH A HAFERMANN

Mailing Address 131 PEAVEY LANE

City

WAYZATA

State

MN

Zip Code

55391

FEC ID number of contributing
federal political committee.

C

Name of Employer

United HealthCare Services Inc

Occupation

EVP Product

Receipt For:

☐ Primary☐ General☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2011

Transaction ID : PR1596313426946

Amount of Each Receipt this Period

500.00

P/R Deduction (\$100.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. KURT A HEUMANN

Mailing Address 9825 GERALD DR

City

SAINT LOUIS

State

MO

Zip Code

63128

FEC ID number of contributing
federal political committee.

C

Name of Employer

United HealthCare Services Inc

Occupation

VP Finance

Receipt For:

☐ Primary☐ General☐ Other (specify) ▼

Aggregate Year-to-Date ▼

520.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2011

Transaction ID : PR1596313726946

Amount of Each Receipt this Period

260.00

P/R Deduction (\$20.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. JOHN H RENNICK JR

Mailing Address 3220 LAKEWOOD EDGE DRIVE

City

CHARLOTTE

State

NC

Zip Code

28269

FEC ID number of contributing
federal political committee.

C

Name of Employer

United HealthCare Services Inc

Occupation

Medical Director

Receipt For:

☐ Primary☐ General☐ Other (specify) ▼

Aggregate Year-to-Date ▼

499.98

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2011

Transaction ID : PR1596316826946

Amount of Each Receipt this Period

249.99

P/R Deduction (\$19.23 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

1009.99

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. STEPHAN S RODGERS

Mailing Address 3455 CONGRESS STREET

City State Zip Code
 FAIRFIELD CT 06824

FEC ID number of contributing
federal political committee.

C

Name of Employer
 United HealthCare Services Inc

Occupation
 CEO Collaborative Care

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4999.80

Date of Receipt

M M / D D / Y Y Y Y Y Y
 12 31 2011

Transaction ID : PR1596317126946

Amount of Each Receipt this Period

2499.90

P/R Deduction (\$192.30 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. DANIEL I ROSENTHAL

Mailing Address 109 SLEEPY HOLLOW LANE

City State Zip Code
 ORINDA CA 94563

FEC ID number of contributing
federal political committee.

C

Name of Employer
 United HealthCare Services Inc

Occupation
 Health Plan CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

499.98

Date of Receipt

M M / D D / Y Y Y Y Y Y
 12 31 2011

Transaction ID : PR1596317326946

Amount of Each Receipt this Period

249.99

P/R Deduction (\$19.23 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. KEVIN J RUTH

Mailing Address 16621 ALEXANDER MANOR DRIVE

City State Zip Code
 SILVER SPRING MD 20905

FEC ID number of contributing
federal political committee.

C

Name of Employer
 United HealthCare Services Inc

Occupation
 SVP Enterprise Clinical Alignm

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1950.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 12 31 2011

Transaction ID : PR1596317426946

Amount of Each Receipt this Period

975.00

P/R Deduction (\$75.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

3724.89

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. MANUEL A SELVA

Mailing Address 7602 NW 127TH MANOR

City
PARKLAND

State Zip Code
FL 33076

FEC ID number of contributing
federal political committee.

C

Name of Employer

United HealthCare Services Inc

Occupation

Sr Medical Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

326.91

Date of Receipt

12 / 31 / 2011

Transaction ID : PR1596317726946

Amount of Each Receipt this Period

76.92

P/R Deduction (\$19.23 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. ROXANNE THOMAS

Mailing Address 720 COUNTRY LAKES DR

City
CIRCLE PINES

State Zip Code
MN 55014

FEC ID number of contributing
federal political committee.

C

Name of Employer

United HealthCare Services Inc

Occupation

Product Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.04

Date of Receipt

12 / 31 / 2011

Transaction ID : PR1596318926946

Amount of Each Receipt this Period

150.02

P/R Deduction (\$11.54 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. JEFFREY ALAN TODD

Mailing Address 467 PRAIRIE WAY SOUTH

City
BAYPORT

State Zip Code
MN 55003

FEC ID number of contributing
federal political committee.

C

Name of Employer

United HealthCare Services Inc

Occupation

VP Underwriting

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

12 / 31 / 2011

Transaction ID : PR1596319026946

Amount of Each Receipt this Period

165.00

P/R Deduction (\$25.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

391.94

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 36 OF 191
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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. CHRIS B TURNAU

Mailing Address PO BOX 43216

3741 DUNBAR KNOLL

City

BROOKLYN PARK

State

MN

Zip Code

55443

FEC ID number of contributing
federal political committee.

C

Name of Employer

United HealthCare Services Inc

Occupation

Dir Tax

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	31	/	2011

Transaction ID : PR1596319126946

Amount of Each Receipt this Period

130.00

P/R Deduction (\$10.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. FRANK M VIERLING

Mailing Address N5021 GREENS COULEE

City

ONALASKA

State

WI

Zip Code

54650

FEC ID number of contributing
federal political committee.

C

Name of Employer

United HealthCare Services Inc

Occupation

Dir General Management

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	31	/	2011

Transaction ID : PR1596319426946

Amount of Each Receipt this Period

130.00

P/R Deduction (\$10.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. M LAURIE WASSERSTEIN

Mailing Address 92 GOODWIN CIRCLE

City

HARTFORD

State

CT

Zip Code

06105

FEC ID number of contributing
federal political committee.

C

Name of Employer

United HealthCare Services Inc

Occupation

PS National VP Account Mgmt

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

480.75

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	31	/	2011

Transaction ID : PR1596319526946

Amount of Each Receipt this Period

230.76

P/R Deduction (\$19.23 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

490.76

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. MYRON R WERLEY

Mailing Address 4260 FOXBERRY COURT

City
MEDINA

State Zip Code
MN 55340

FEC ID number of contributing
federal political committee.

C

Name of Employer

United HealthCare Services Inc

Occupation

Dir Underwriting

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 31 2011

Transaction ID : PR1596319626946

Amount of Each Receipt this Period

162.50

P/R Deduction (\$12.50 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. WILLIAM R WILSON

Mailing Address 7 CLIFFORD AVENUE

City
TOLLAND

State Zip Code
CT 06084

FEC ID number of contributing
federal political committee.

C

Name of Employer

United HealthCare Services Inc

Occupation

Dir Underwriting

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 31 2011

Transaction ID : PR1596320026946

Amount of Each Receipt this Period

130.00

P/R Deduction (\$10.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. JANET PATRICIA GULLETT

Mailing Address 7310 WELLS RD

City
PLAIN CITY

State Zip Code
OH 43064

FEC ID number of contributing
federal political committee.

C

Name of Employer

United HealthCare Services Inc

Occupation

Mgr IT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 31 2011

Transaction ID : PR1596320126946

Amount of Each Receipt this Period

130.00

P/R Deduction (\$10.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

422.50

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. JOHN P DODDY

Mailing Address 1 ROXITICUS VIEW

City
CHESTER

State Zip Code
NJ 07930

FEC ID number of contributing
federal political committee.

C

Name of Employer
United HealthCare Services Inc

Occupation
VP Information Technology

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

767.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 31 2011

Transaction ID : PR1600597326946

Amount of Each Receipt this Period

507.00

P/R Deduction (\$39.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. MICHAEL D MICHAUX

Mailing Address 742 GOODRICH AVE

City
SAINT PAUL

State Zip Code
MN 55105

FEC ID number of contributing
federal political committee.

C

Name of Employer
United HealthCare Services Inc

Occupation
VP & GM PCM

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 31 2011

Transaction ID : PR1600598526946

Amount of Each Receipt this Period

1300.00

P/R Deduction (\$100.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. LEWIS G SANDY

Mailing Address 4800 SUNNYSLOPE ROAD E

City
EDINA

State Zip Code
MN 55424

FEC ID number of contributing
federal political committee.

C

Name of Employer
United HealthCare Services Inc

Occupation
SVP Clinical Advancement

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 31 2011

Transaction ID : PR1600598726946

Amount of Each Receipt this Period

1300.00

P/R Deduction (\$100.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

3107.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. MATTHEW W PETERSON

Mailing Address 20595 SPENCER LANE

City
SHOREWOOD

State Zip Code
MN 55331

FEC ID number of contributing
federal political committee.

C

Name of Employer
United HealthCare Services Inc

Occupation
Market Group CAO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 31 2011

Transaction ID : PR1602669926946

Amount of Each Receipt this Period

1300.00

P/R Deduction (\$100.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. JEFFREY W MALONEY

Mailing Address 18076 CLEAR SPRING LANE

City
EDEN PRAIRIE

State Zip Code
MN 55347

FEC ID number of contributing
federal political committee.

C

Name of Employer
United HealthCare Services Inc

Occupation
VP Operations - Evercare

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2499.90

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 31 2011

Transaction ID : PR1613243526946

Amount of Each Receipt this Period

1249.95

P/R Deduction (\$96.15 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. LINDA L CULLEN

Mailing Address 441 E N BROADWAY

City
COLUMBUS

State Zip Code
OH 43214

FEC ID number of contributing
federal political committee.

C

Name of Employer
United HealthCare Services Inc

Occupation
Assoc Dir Regulatory Affairs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 31 2011

Transaction ID : PR1632359726946

Amount of Each Receipt this Period

130.00

P/R Deduction (\$10.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

2679.95

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. DANIEL S WALLER

Mailing Address 17034 BAINBRIDGE DR

City State Zip Code
EDEN PRAIRIE MN 55347

FEC ID number of contributing
federal political committee.

C

Name of Employer
United HealthCare Services Inc

Occupation
Dir Finance

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

520.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 31 2011

Transaction ID : PR1632360026946

Amount of Each Receipt this Period

390.00

P/R Deduction (\$30.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. WILLIAM F KENNEDY

Mailing Address 14 MYRA LN

City State Zip Code
BURLINGTON CT 06013

FEC ID number of contributing
federal political committee.

C

Name of Employer
United HealthCare Services Inc

Occupation
Dir IT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

520.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 31 2011

Transaction ID : PR1653443126946

Amount of Each Receipt this Period

260.00

P/R Deduction (\$20.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. STEVE R KOOREN

Mailing Address 4444 ELLSWORTH DRIVE

City State Zip Code
EDINA MN 55435

FEC ID number of contributing
federal political committee.

C

Name of Employer
United HealthCare Services Inc

Occupation
Business Segment CFO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4999.80

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 31 2011

Transaction ID : PR1653443226946

Amount of Each Receipt this Period

2499.90

P/R Deduction (\$192.30 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

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3149.90

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. THOMAS J BELLAMY

Mailing Address 2743 THOMAS AVENUE SOUTH

City State Zip Code
MINNEAPOLIS MN 55416

FEC ID number of contributing federal political committee.

C

Name of Employer

United HealthCare Services Inc

Occupation

SB VP Inside Sales & AM

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 31 2011

Transaction ID : PR1653444326946

Amount of Each Receipt this Period

750.10

P/R Deduction (\$57.70 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. ROBERT L HOLMAN

Mailing Address N12464 HORSESHOE BEND RD

City State Zip Code
MINONG WI 54859

FEC ID number of contributing federal political committee.

C

Name of Employer

United HealthCare Services Inc

Occupation

Dir Provider Reimb

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 31 2011

Transaction ID : PR1653445026946

Amount of Each Receipt this Period

130.00

P/R Deduction (\$10.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. ALISTAIR D JACQUES

Mailing Address 645 OLD LONG LAKE ROAD

City State Zip Code
ORONO MN 55391

FEC ID number of contributing federal political committee.

C

Name of Employer

United HealthCare Services Inc

Occupation

Business Segment CIO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4999.80

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 31 2011

Transaction ID : PR1653445226946

Amount of Each Receipt this Period

2499.90

P/R Deduction (\$192.30 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

3380.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. DANIEL T SULLIVAN

Mailing Address 57 QUORN HUNT ROAD

City

WEST SIMSBURY

State

CT

Zip Code

06092

FEC ID number of contributing
federal political committee.

C

Name of Employer

United HealthCare Services Inc

Occupation

Dir IT Project Mgmt

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.04

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 31 / 2011

Transaction ID : PR1653445826946

Amount of Each Receipt this Period

150.02

P/R Deduction (\$11.54 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. ELIZABETH DARCIE D. CORBIN

Mailing Address 7985 LEA CIRCLE

City

BLOOMINGTON

State

MN

Zip Code

55438

FEC ID number of contributing
federal political committee.

C

Name of Employer

United HealthCare Services Inc

Occupation

VP Health Care Initiatives

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 31 / 2011

Transaction ID : PR1669432226946

Amount of Each Receipt this Period

600.00

P/R Deduction (\$100.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. Mr. MILES S SNOWDEN

Mailing Address 4349 FREMONT AVE S

City

MINNEAPOLIS

State

MN

Zip Code

55409

FEC ID number of contributing
federal political committee.

C

Name of Employer

United HealthCare Services Inc

Occupation

Business Segment CMO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4999.80

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 31 / 2011

Transaction ID : PR1746717826946

Amount of Each Receipt this Period

2499.90

P/R Deduction (\$192.30 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

3249.92

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. ANN DESTWOLINSKI

Mailing Address 777 S EDEN STREET
#604

City State Zip Code
BALTIMORE MD 21231

FEC ID number of contributing
federal political committee.

C

Name of Employer

United HealthCare Services Inc

Occupation

Assoc Dir Utilization Mgmt

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

286.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 31 2011

Transaction ID : PR1806441626946

Amount of Each Receipt this Period

143.00

P/R Deduction (\$11.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. JASON DUDASH

Mailing Address 2918 BACHMAN RD

City State Zip Code
MANCHESTER MD 21102

FEC ID number of contributing
federal political committee.

C

Name of Employer

United HealthCare Services Inc

Occupation

Mgr IT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 31 2011

Transaction ID : PR1806441926946

Amount of Each Receipt this Period

130.00

P/R Deduction (\$10.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. JEFF L LEVINE

Mailing Address 619 BOND AVE

City State Zip Code
REISTERSTOWN MD 21136

FEC ID number of contributing
federal political committee.

C

Name of Employer

United HealthCare Services Inc

Occupation

PS Mgr Acct Mgmt (FEHBP)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

605.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 31 2011

Transaction ID : PR1806443226946

Amount of Each Receipt this Period

-20.00

P/R Deduction (\$20.00 Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

253.00

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. **WILLIAM TALAMANTES**

Mailing Address 11618 ROLLING MEADOW DR

City State Zip Code
 GREAT FALLS VA 22066

FEC ID number of contributing
federal political committee.

C

Name of Employer

United HealthCare Services Inc

Occupation

Six Sigma Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

457.60

Date of Receipt

M M / D D / Y Y Y Y Y Y
 12 31 2011

Transaction ID : PR1806444726946

Amount of Each Receipt this Period

228.80

P/R Deduction (\$17.60 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. **LORI A ARCHER**

Mailing Address 2781 SADDLE CLUB ROAD

City State Zip Code
 GREENWOOD IN 46143

FEC ID number of contributing
federal political committee.

C

Name of Employer

United HealthCare Services Inc

Occupation

Dir Provider Svc

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.04

Date of Receipt

M M / D D / Y Y Y Y Y Y
 12 31 2011

Transaction ID : PR1806750126946

Amount of Each Receipt this Period

150.02

P/R Deduction (\$11.54 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. **PAUL M EMERSON**

Mailing Address 18855 MEADOW VIEW BLVD

City State Zip Code
 PRIOR LAKE MN 55372

FEC ID number of contributing
federal political committee.

C

Name of Employer

United HealthCare Services Inc

Occupation

Business Segment CFO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

999.96

Date of Receipt

M M / D D / Y Y Y Y Y Y
 12 31 2011

Transaction ID : PR1806750326946

Amount of Each Receipt this Period

499.98

P/R Deduction (\$38.46 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

878.80

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. SHERRI C PINOTTI

Mailing Address 416 BEAR AVE S

City State Zip Code
VADNAIS HEIGHTS MN 55127

FEC ID number of contributing
federal political committee.

C

Name of Employer

United HealthCare Services Inc

Occupation

Dir IT Project Mgmt

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

247.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 31 2011

Transaction ID : PR1832039826946

Amount of Each Receipt this Period

123.50

P/R Deduction (\$9.50 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. MICHELLE D LEDELL

Mailing Address 5115 SARATOGA LANE

City State Zip Code
PLYMOUTH MN 55442

FEC ID number of contributing
federal political committee.

C

Name of Employer

United HealthCare Services Inc

Occupation

Human Capital Partner (Mgr)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1040.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 31 2011

Transaction ID : PR1882850626946

Amount of Each Receipt this Period

520.00

P/R Deduction (\$40.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. CATHERINE K ANDERSON

Mailing Address 37 W 2000 S

City State Zip Code
DRIGGS ID 83422

FEC ID number of contributing
federal political committee.

C

Name of Employer

United HealthCare Services Inc

Occupation

Dir Marketing Bus Dev

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.20

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 31 2011

Transaction ID : PR1903550726946

Amount of Each Receipt this Period

750.10

P/R Deduction (\$57.70 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1393.60

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. KATHLEEN L BISHOP

Mailing Address 145 COTTAGE RD

City
ENFIELD

State Zip Code
CT 06082

FEC ID number of contributing
federal political committee.

C

Name of Employer
United HealthCare Services Inc

Occupation
Dir Finance

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

520.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 31 2011

Transaction ID : PR1903560826946

Amount of Each Receipt this Period

260.00

P/R Deduction (\$20.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. ROBERT J DUFEK

Mailing Address 816 PROMONTORY PLACE

City
EAGAN

State Zip Code
MN 55123

FEC ID number of contributing
federal political committee.

C

Name of Employer
United HealthCare Services Inc

Occupation
VP IT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 31 2011

Transaction ID : PR1903577126946

Amount of Each Receipt this Period

325.00

P/R Deduction (\$25.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. SUSAN B EDBERG

Mailing Address 9727 WELLINGTON RIDGE

City
WOODBURY

State Zip Code
MN 55125

FEC ID number of contributing
federal political committee.

C

Name of Employer
United HealthCare Services Inc

Occupation
VP Customer Service

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 31 2011

Transaction ID : PR1903578126946

Amount of Each Receipt this Period

1300.00

P/R Deduction (\$100.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1885.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. CHRISTOPHER T JOHNSON

Mailing Address 12880 53RD STREET NORTH

City

STILLWATER

State

MN

Zip Code

55082

FEC ID number of contributing
federal political committee.

C

Name of Employer

United HealthCare Services Inc

Occupation

Dir General Management

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

579.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 31 / 2011

Transaction ID : PR1903591126946

Amount of Each Receipt this Period

449.00

P/R Deduction (\$39.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. JOHN C SANTELLI

Mailing Address 17498 GEORGE MORAN DRIVE

City

EDEN PRAIRIE

State

MN

Zip Code

55347

FEC ID number of contributing
federal political committee.

C

Name of Employer

United HealthCare Services Inc

Occupation

SVP & CIO

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 31 / 2011

Transaction ID : PR1903622026946

Amount of Each Receipt this Period

1300.00

P/R Deduction (\$100.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. PAUL D WEYMOUTH

Mailing Address 128 WOODLAND RD

City

COVENTRY

State

CT

Zip Code

06238

FEC ID number of contributing
federal political committee.

C

Name of Employer

United HealthCare Services Inc

Occupation

VP Finance

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

499.98

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 31 / 2011

Transaction ID : PR1903636926946

Amount of Each Receipt this Period

249.99

P/R Deduction (\$19.23 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

1998.99

TOTAL This Period (last page this line number only)..... ►

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. PAMELA JAMIAN

Mailing Address 15316 COUTOLENC RD

City State Zip Code
 MAGALIA CA 95954

FEC ID number of contributing federal political committee.

C

Name of Employer

United HealthCare Services Inc

Occupation

Dir Customer Service

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.04

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 12 31 2011

Transaction ID : PR1910417426946

Amount of Each Receipt this Period

150.02

P/R Deduction (\$11.54 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. BRADLEY E ALLEN

Mailing Address 1046 THORNBERRY CREEK DR

City State Zip Code
 ONEIDA WI 54155

FEC ID number of contributing federal political committee.

C

Name of Employer

United HealthCare Services Inc

Occupation

Sr Associate General Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

520.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 12 31 2011

Transaction ID : PR2119466826946

Amount of Each Receipt this Period

260.00

P/R Deduction (\$0.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. JON D D BEATY

Mailing Address 12103 SE TURLEY PLACE

City State Zip Code
 HAPPY VALLEY OR 97086

FEC ID number of contributing federal political committee.

C

Name of Employer

United HealthCare Services Inc

Occupation

Dir Clinical Quality

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 12 31 2011

Transaction ID : PR2119467826946

Amount of Each Receipt this Period

130.00

P/R Deduction (\$10.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

540.02

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. RUSSELL A BENNETT

Mailing Address 4 HALSEY AVE

City State Zip Code
LAGUNA NIGUEL CA 92677

FEC ID number of contributing federal political committee.

C

Name of Employer
United HealthCare Services Inc

Occupation
Dir Marketing Bus Dev

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

520.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 31 2011

Transaction ID : PR2119468026946

Amount of Each Receipt this Period

260.00

P/R Deduction (\$20.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. SUSAN LYNN BERKEL

Mailing Address 10 SHADOW GLEN

City State Zip Code
IRVINE CA 92620

FEC ID number of contributing federal political committee.

C

Name of Employer
United HealthCare Services Inc

Occupation
SVP Operations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4992.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 31 2011

Transaction ID : PR2119468126946

Amount of Each Receipt this Period

2496.00

P/R Deduction (\$192.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. KATHIE L BRYAN

Mailing Address 912 JOSHUA PLACE

City State Zip Code
SAN DIEGO CA 92154

FEC ID number of contributing federal political committee.

C

Name of Employer
United HealthCare Services Inc

Occupation
Assoc Dir Mrkting Comm

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 31 2011

Transaction ID : PR2119469426946

Amount of Each Receipt this Period

325.00

P/R Deduction (\$25.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

3081.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. DANIEL P CADRIEL

Mailing Address 23634 NORTH 58TH AVENUE

City
GLENDALE

State Zip Code
AZ 85310

FEC ID number of contributing
federal political committee.

C

Name of Employer
United HealthCare Services Inc

Occupation
PS Dir. Strategic Accts

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 31 2011

Transaction ID : PR2119469826946

Amount of Each Receipt this Period

130.00

P/R Deduction (\$10.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. COLLEEN CAMPBELL

Mailing Address 5753 E SANTA ANA CYN RD # G502

City
ANAHEIM

State Zip Code
CA 92807

FEC ID number of contributing
federal political committee.

C

Name of Employer
United HealthCare Services Inc

Occupation
Assoc Dir Clinical Quality

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

390.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 31 2011

Transaction ID : PR2119469926946

Amount of Each Receipt this Period

195.00

P/R Deduction (\$15.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. DAVID S CARLSON

Mailing Address 13130 WESTPORT ST

City
MOORPARK

State Zip Code
CA 93021

FEC ID number of contributing
federal political committee.

C

Name of Employer
United HealthCare Services Inc

Occupation
Dir Marketing Research

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

520.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 31 2011

Transaction ID : PR2119470226946

Amount of Each Receipt this Period

260.00

P/R Deduction (\$20.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

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585.00

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. LESLIE J CARTER

Mailing Address 19021 POPPY HILL CIRCLE

City State Zip Code
HUNTINGTON BEACH CA 92648

FEC ID number of contributing
federal political committee.

C

Name of Employer

United HealthCare Services Inc

Occupation

Dir Network Contracting

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2496.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 31 2011

Transaction ID : PR2119470326946

Amount of Each Receipt this Period

1248.00

P/R Deduction (\$96.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. RANDELL J CORREIA

Mailing Address PO BOX 1025

City State Zip Code
RANCHO SANTA FE CA 92067

FEC ID number of contributing
federal political committee.

C

Name of Employer

United HealthCare Services Inc

Occupation

SVP Operations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

780.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 31 2011

Transaction ID : PR2119471326946

Amount of Each Receipt this Period

390.00

P/R Deduction (\$30.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. RICHARD A CROSS

Mailing Address 11361 DONOVAN ROAD

City State Zip Code
ROSSMOOR CA 90720

FEC ID number of contributing
federal political committee.

C

Name of Employer

United HealthCare Services Inc

Occupation

Deputy General Counsel (Mgr)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 31 2011

Transaction ID : PR2119471826946

Amount of Each Receipt this Period

325.00

P/R Deduction (\$25.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1963.00

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Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. KENNETH R DAVIS

Mailing Address 7640 N 10TH AVE

City
PHOENIXState Zip Code
AZ 85021FEC ID number of contributing
federal political committee.

C

Name of Employer

United HealthCare Services Inc

Occupation

Medical Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

520.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 31 2011

Transaction ID : PR2119472526946

Amount of Each Receipt this Period

260.00

P/R Deduction (\$20.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. LINDA M DAYAN

Mailing Address 5364 E ABBEYFIELD ST

City
LONG BEACHState Zip Code
CA 90815FEC ID number of contributing
federal political committee.

C

Name of Employer

United HealthCare Services Inc

Occupation

Chief of Staff

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

494.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 31 2011

Transaction ID : PR2119472626946

Amount of Each Receipt this Period

247.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. TODD J DEMBROSKI

Mailing Address 1390 FINCH LN

City
GREEN BAYState Zip Code
WI 54313FEC ID number of contributing
federal political committee.

C

Name of Employer

United HealthCare Services Inc

Occupation

Assoc Dir Actuarial Services

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

390.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 31 2011

Transaction ID : PR2119472826946

Amount of Each Receipt this Period

195.00

P/R Deduction (\$15.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

702.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. ANDREA E DILWEG

Mailing Address 2321 CARROLL PK SOUTH

City

LONG BEACH

State

CA

Zip Code

90814

FEC ID number of contributing
federal political committee.

C

Name of Employer

United HealthCare Services Inc

Occupation

Dir Govt Rel

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

962.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 31 / 2011

Transaction ID : PR2119472926946

Amount of Each Receipt this Period

481.00

P/R Deduction (\$37.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. TARA M DUNGAN

Mailing Address PO BOX 691354

City

SAN ANTONIO

State

TX

Zip Code

78269

FEC ID number of contributing
federal political committee.

C

Name of Employer

United HealthCare Services Inc

Occupation

Mgr Medical & Clinical Ops

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 31 / 2011

Transaction ID : PR2119473226946

Amount of Each Receipt this Period

130.00

P/R Deduction (\$10.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. BRADLEY M FLUITT

Mailing Address 108 NORTH ROLLING OAKS

City

SAN ANTONIO

State

TX

Zip Code

78253

FEC ID number of contributing
federal political committee.

C

Name of Employer

United HealthCare Services Inc

Occupation

VP IT

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 31 / 2011

Transaction ID : PR2119474126946

Amount of Each Receipt this Period

130.00

P/R Deduction (\$10.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

741.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. ANGELO GIAMBRONE

Mailing Address 1821 PARK STREET

City State Zip Code
HUNTINGTON BEACH CA 92648

FEC ID number of contributing
federal political committee.

C

Name of Employer
United HealthCare Services Inc

Occupation
SVP Networks

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1420.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 31 2011

Transaction ID : PR2119475126946

Amount of Each Receipt this Period

650.00

P/R Deduction (\$50.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. AMY J GILDERNICK

Mailing Address 2709 WILLIAMS GRANT

City State Zip Code
DE PERE WI 54115

FEC ID number of contributing
federal political committee.

C

Name of Employer
United HealthCare Services Inc

Occupation
Assoc Dir Claims

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

520.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 31 2011

Transaction ID : PR2119475226946

Amount of Each Receipt this Period

260.00

P/R Deduction (\$20.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. SANDRA R GLICKMAN

Mailing Address 13622 SIOUX RD

City State Zip Code
WESTMINSTER CA 92683

FEC ID number of contributing
federal political committee.

C

Name of Employer
United HealthCare Services Inc

Occupation
Dir Case Mgmt

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 31 2011

Transaction ID : PR2119475326946

Amount of Each Receipt this Period

130.00

P/R Deduction (\$10.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1040.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. DAVID M HANSEN

Mailing Address 33 VIA CONOCIDO

City

SAN CLEMENTE

State

CA

Zip Code

92673

FEC ID number of contributing
federal political committee.

C

Name of Employer

United HealthCare Services Inc

Occupation

Health Plan CEO

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

3510.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 31 / 2011

Transaction ID : PR2119476726946

Amount of Each Receipt this Period

1755.00

P/R Deduction (\$135.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. ANNE P HARVEY

Mailing Address 4916 THOR WAY

City

CARMICHAEL

State

CA

Zip Code

95608

FEC ID number of contributing
federal political committee.

C

Name of Employer

United HealthCare Services Inc

Occupation

Assoc Dir Provider Svc

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 31 / 2011

Transaction ID : PR2119477226946

Amount of Each Receipt this Period

130.00

P/R Deduction (\$10.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. PAULINE M HAYES

Mailing Address PO BOX 839

City

HUNTINGTON BEACH

State

CA

Zip Code

92648

FEC ID number of contributing
federal political committee.

C

Name of Employer

United HealthCare Services Inc

Occupation

Assoc Dir Finance

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 31 / 2011

Transaction ID : PR2119477426946

Amount of Each Receipt this Period

130.00

P/R Deduction (\$10.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

2015.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. SAMUEL W HO

Mailing Address 4220 OCEAN DR

City State Zip Code
 MANHATTAN BEACH CA 90266

FEC ID number of contributing
federal political committee.

C

Name of Employer
 United HealthCare Services Inc

Occupation
 Market Grp Chief Clinical Off

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3998.80

Date of Receipt

M M / D D / Y Y Y Y Y Y
 12 31 2011

Transaction ID : PR2119477926946

Amount of Each Receipt this Period

1999.40

P/R Deduction (\$153.80 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. KEVIN D HOST

Mailing Address 14617 GRANT ST

City State Zip Code
 OVERLAND PARK KS 66221

FEC ID number of contributing
federal political committee.

C

Name of Employer
 United HealthCare Services Inc

Occupation
 Dir Pharmacy Operations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

520.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 12 31 2011

Transaction ID : PR2119478226946

Amount of Each Receipt this Period

260.00

P/R Deduction (\$20.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. DONNA L HUSER

Mailing Address 406 SKYTRAIL DR

City State Zip Code
 NEW BRAUNFELS TX 78130

FEC ID number of contributing
federal political committee.

C

Name of Employer
 United HealthCare Services Inc

Occupation
 Claims Bus Proc Analyst

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 12 31 2011

Transaction ID : PR2119478626946

Amount of Each Receipt this Period

130.00

P/R Deduction (\$10.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

2389.40

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. **BRIAN JEFFREY**

Mailing Address 9 RIMROCK

City State Zip Code
 IRVINE CA 92603

FEC ID number of contributing
federal political committee.

C

Name of Employer
United HealthCare Services Inc

Occupation
VP Network Contracting

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 12 31 2011

Transaction ID : PR2119479126946

Amount of Each Receipt this Period

325.00

P/R Deduction (\$25.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. **JOHN D JONES**

Mailing Address 3562 REDWOOD

City State Zip Code
 IRVINE CA 92606

FEC ID number of contributing
federal political committee.

C

Name of Employer
United HealthCare Services Inc

Occupation
VP Govt Rel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2496.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 12 31 2011

Transaction ID : PR2119479226946

Amount of Each Receipt this Period

1248.00

P/R Deduction (\$96.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. **MARK C KNUTSON**

Mailing Address 13102 PALOMAR WAY

City State Zip Code
 NORTH TUSTIN CA 92705

FEC ID number of contributing
federal political committee.

C

Name of Employer
United HealthCare Services Inc

Occupation
VP Customer Service

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

390.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 12 31 2011

Transaction ID : PR2119480226946

Amount of Each Receipt this Period

195.00

P/R Deduction (\$15.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

1768.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. PAMELA S LEAL

Mailing Address 8371 CLARKDALE

City State Zip Code
 HUNTINGTON BEACH CA 92646

FEC ID number of contributing
federal political committee.

C

Name of Employer
United HealthCare Services Inc

Occupation
Dir Network Contracting

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 12 31 2011

Transaction ID : PR2119481026946

Amount of Each Receipt this Period

130.00

P/R Deduction (\$10.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. CHARLES E LEWIS

Mailing Address 7417 S LAFAYETTE CR EAST

City State Zip Code
 CENTENNIAL CO 80122

FEC ID number of contributing
federal political committee.

C

Name of Employer
United HealthCare Services Inc

Occupation
M&R Regional Sales Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 12 31 2011

Transaction ID : PR2119481526946

Amount of Each Receipt this Period

130.00

P/R Deduction (\$10.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. SANDY M LUEDKE

Mailing Address 1208 COPRINUS DR

City State Zip Code
 GREEN BAY WI 54313

FEC ID number of contributing
federal political committee.

C

Name of Employer
United HealthCare Services Inc

Occupation
IT Database Cnsltnt

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

390.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 12 31 2011

Transaction ID : PR2119482226946

Amount of Each Receipt this Period

195.00

P/R Deduction (\$15.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

455.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. TIMOTHY A LUKER

Mailing Address 3115 S GOTHIC CIRCLE

City State Zip Code
 GREEN BAY WI 54313

FEC ID number of contributing federal political committee.

C

Name of Employer

United HealthCare Services Inc

Occupation

Dir Actuarial Services

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 12 31 2011

Transaction ID : PR2119482326946

Amount of Each Receipt this Period

104.00

P/R Deduction (\$8.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. HEATHER M MACE-MEADOR

Mailing Address 13531 CARLTON OAKS

City State Zip Code
 SAN ANTONIO TX 78232

FEC ID number of contributing federal political committee.

C

Name of Employer

United HealthCare Services Inc

Occupation

Dir Medical & Clinical Ops

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

520.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 12 31 2011

Transaction ID : PR2119482526946

Amount of Each Receipt this Period

260.00

P/R Deduction (\$20.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. JEFFREY S MASON

Mailing Address 5670 SHEMIRAN ST

City State Zip Code
 LA VERNE CA 91750

FEC ID number of contributing federal political committee.

C

Name of Employer

United HealthCare Services Inc

Occupation

Sr Medical Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

390.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 12 31 2011

Transaction ID : PR2119483026946

Amount of Each Receipt this Period

195.00

P/R Deduction (\$15.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

559.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. BENITO M MIRANDA

Mailing Address PO BOX 1522

City
LOMITA

State
CA

Zip Code
90717

FEC ID number of contributing
federal political committee.

C

Name of Employer

United HealthCare Services Inc

Occupation

Medicare Individual Sales Rep

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

312.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 31 / 2011

Transaction ID : PR2119484226946

Amount of Each Receipt this Period

156.00

P/R Deduction (\$12.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. NANCY J MONK

Mailing Address 12271 CHIANTI DRIVE

City

LOS ALAMITOS

State

CA

Zip Code

90720

FEC ID number of contributing
federal political committee.

C

Name of Employer

United HealthCare Services Inc

Occupation

VP Govt Affairs & Compl

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 31 / 2011

Transaction ID : PR2119484326946

Amount of Each Receipt this Period

650.00

P/R Deduction (\$50.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. CAROLYN L MURRAY

Mailing Address 834 WOODTACK COVE WAY

City

HENDERSON

State

NV

Zip Code

89002

FEC ID number of contributing
federal political committee.

C

Name of Employer

Health Plan of Nevada

Occupation

SB Mgr Account Mgmt

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 31 / 2011

Transaction ID : PR2119484826946

Amount of Each Receipt this Period

130.00

P/R Deduction (\$10.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

936.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. SCOTT A NEURURER

Mailing Address 23822 VIA MONTE

City State Zip Code
COTO DE CAZA CA 92679

FEC ID number of contributing
federal political committee.

C

Name of Employer
United HealthCare Services Inc

Occupation
VP General Management

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 31 2011

Transaction ID : PR2119484926946

Amount of Each Receipt this Period

130.00

P/R Deduction (\$10.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. KEITH E NYGARD

Mailing Address 1139 E OCEAN BOULEVARD
#106

City State Zip Code
LONG BEACH CA 90802

FEC ID number of contributing
federal political committee.

C

Name of Employer
United HealthCare Services Inc

Occupation
Assoc Dir Compliance

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

520.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 31 2011

Transaction ID : PR2119485026946

Amount of Each Receipt this Period

260.00

P/R Deduction (\$20.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. TRACY L OLLMANN-WAGNER

Mailing Address 2839 TIMBER LANE

City State Zip Code
GREEN BAY WI 54313

FEC ID number of contributing
federal political committee.

C

Name of Employer
United HealthCare Services Inc

Occupation
Mgr Traffic/Workforce

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

390.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 31 2011

Transaction ID : PR2119485226946

Amount of Each Receipt this Period

195.00

P/R Deduction (\$15.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

585.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. WILLIAM H OLSON

Mailing Address 1825 GALINDO AVE APT 416

City State Zip Code
 CONCORD CA 94520

FEC ID number of contributing
federal political committee.

C

Name of Employer
 United HealthCare Services Inc

Occupation
 Medical Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 12 31 2011

Transaction ID : PR2119485326946

Amount of Each Receipt this Period

130.00

P/R Deduction (\$10.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. CYNTHIA ANN OTTO

Mailing Address 1855 O LEARY ROAD

City State Zip Code
 NEENAH WI 54956

FEC ID number of contributing
federal political committee.

C

Name of Employer
 United HealthCare Services Inc

Occupation
 Assoc Dir Case Mgmt

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

390.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 12 31 2011

Transaction ID : PR2119485426946

Amount of Each Receipt this Period

195.00

P/R Deduction (\$15.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. LYND A PAXSON

Mailing Address 3924 E GARNET PL

City State Zip Code
 HIGHLANDS RANCH CO 80126

FEC ID number of contributing
federal political committee.

C

Name of Employer
 United HealthCare Services Inc

Occupation
 Sr Field Account Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 12 31 2011

Transaction ID : PR2119485826946

Amount of Each Receipt this Period

325.00

P/R Deduction (\$25.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

650.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. DIANA S PETE

Mailing Address 9010 MORNINGSTAR DRIVE

City State Zip Code
 SUGAR LAND TX 77479

FEC ID number of contributing
federal political committee.

C

Name of Employer
 United HealthCare Services Inc

Occupation
 Assoc Dir Utilization Mgmt

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

312.00

Date of Receipt

M M / D D / Y Y Y Y Y
 12 31 2011

Transaction ID : PR2119486326946

Amount of Each Receipt this Period

156.00

P/R Deduction (\$12.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. MICHELLE LYNN PETERS

Mailing Address 1128 COUNTRYSIDE DR

City State Zip Code
 DE PERE WI 54115

FEC ID number of contributing
federal political committee.

C

Name of Employer
 United HealthCare Services Inc

Occupation
 Dir Actuarial Services

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

390.00

Date of Receipt

M M / D D / Y Y Y Y Y
 12 31 2011

Transaction ID : PR2119486426946

Amount of Each Receipt this Period

195.00

P/R Deduction (\$15.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. AUSTIN T PITTMAN

Mailing Address 14 LOCH RIDGE DRIVE

City State Zip Code
 GREENSBORO NC 27408

FEC ID number of contributing
federal political committee.

C

Name of Employer
 United HealthCare Services Inc

Occupation
 President Networks

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3510.00

Date of Receipt

M M / D D / Y Y Y Y Y
 12 31 2011

Transaction ID : PR2119486726946

Amount of Each Receipt this Period

1755.00

P/R Deduction (\$135.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

2106.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. CYNTHIA L POLICH

Mailing Address 3401 E VIA PALOMITA

City
TUCSON

State Zip Code
AZ 85718

FEC ID number of contributing
federal political committee.

C

Name of Employer
United HealthCare Services Inc

Occupation
M&R President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 31 2011

Transaction ID : PR2119486826946

Amount of Each Receipt this Period

1300.00

P/R Deduction (\$100.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. SHARON A RICCIUTI

Mailing Address 55 PERENNIAL

City
IRVINE

State Zip Code
CA 92603

FEC ID number of contributing
federal political committee.

C

Name of Employer
United HealthCare Services Inc

Occupation
Dir Clinical Quality

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

520.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 31 2011

Transaction ID : PR2119487926946

Amount of Each Receipt this Period

260.00

P/R Deduction (\$20.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. DEBBIE E ROGERS

Mailing Address 413 DOE RUN RD

City
SEQUIM

State Zip Code
WA 98382

FEC ID number of contributing
federal political committee.

C

Name of Employer
United HealthCare Services Inc

Occupation
Sr Project Manager I

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 31 2011

Transaction ID : PR2119488626946

Amount of Each Receipt this Period

130.00

P/R Deduction (\$10.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1690.00

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. CAROL A SCACCIA

Mailing Address 14848 LANDERWOOD DR

City State Zip Code
 EASTVALE CA 92880

FEC ID number of contributing
federal political committee.

C

Name of Employer
 United HealthCare Services Inc

Occupation
 KA New Business Coordinator

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 12 31 2011

Transaction ID : PR2119489326946

Amount of Each Receipt this Period

130.00

P/R Deduction (\$10.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. MARTIN SING

Mailing Address 9407 LLANO VERDE

City State Zip Code
 HELOTES TX 78023

FEC ID number of contributing
federal political committee.

C

Name of Employer
 United HealthCare Services Inc

Occupation
 Dir Customer Service

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 12 31 2011

Transaction ID : PR2119490126946

Amount of Each Receipt this Period

130.00

P/R Deduction (\$10.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. RONALD R STETTLER

Mailing Address 6028 SCOTMIST DR

City State Zip Code
 RANCHO PALOS VERDES CA 90275

FEC ID number of contributing
federal political committee.

C

Name of Employer
 United HealthCare Services Inc

Occupation
 VP Healthcare Econ

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 12 31 2011

Transaction ID : PR2119490426946

Amount of Each Receipt this Period

130.00

P/R Deduction (\$10.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

390.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. MARILYNN D STYERS

Mailing Address 6485 WAYFINDERS CT

City State Zip Code
 CARLSBAD CA 92009

FEC ID number of contributing
federal political committee.

C

Name of Employer

United HealthCare Services Inc

Occupation

VP Medical & Clinical Ops

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

520.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 12 31 2011

Transaction ID : PR2119490726946

Amount of Each Receipt this Period

260.00

P/R Deduction (\$20.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. CHERYL TANIGAWA MD

Mailing Address 5598 NAPLES CANAL

City State Zip Code
 LONG BEACH CA 90803

FEC ID number of contributing
federal political committee.

C

Name of Employer

United HealthCare Services Inc

Occupation

SVP Enterprise Health Svcs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 12 31 2011

Transaction ID : PR2119491126946

Amount of Each Receipt this Period

650.00

P/R Deduction (\$50.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. CHERYL A THOMSON

Mailing Address 222 FOREST DR

City State Zip Code
 SOBIESKI WI 54171

FEC ID number of contributing
federal political committee.

C

Name of Employer

United HealthCare Services Inc

Occupation

Dir Compliance

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

390.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 12 31 2011

Transaction ID : PR2119491626946

Amount of Each Receipt this Period

195.00

P/R Deduction (\$15.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1105.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. STEVEN M TUCKER

Mailing Address 12331 COUNTRY LANE

City
SANTA ANA

State Zip Code
CA 92705

FEC ID number of contributing
federal political committee.

C

Name of Employer
United HealthCare Services Inc

Occupation
VP Regulatory Affairs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2496.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 31 2011

Transaction ID : PR2119492026946

Amount of Each Receipt this Period

1248.00

P/R Deduction (\$96.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. SUSAN VANASTEN

Mailing Address W313 GOLDEN GLOW RD

City
KAUKAUNA

State Zip Code
WI 54130

FEC ID number of contributing
federal political committee.

C

Name of Employer
United HealthCare Services Inc

Occupation
Site Dir Medicare Inside Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1040.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 31 2011

Transaction ID : PR2119492626946

Amount of Each Receipt this Period

520.00

P/R Deduction (\$40.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. SCOTT B WESTPHAL

Mailing Address 4536 ROCKY RUN LN

City
OCONTO

State Zip Code
WI 54153

FEC ID number of contributing
federal political committee.

C

Name of Employer
United HealthCare Services Inc

Occupation
Dir Actuarial Services

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.04

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 31 2011

Transaction ID : PR2119493226946

Amount of Each Receipt this Period

150.02

P/R Deduction (\$11.54 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1918.02

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. LINDA D DAUGHERTY

Mailing Address 15442 NORTH 19TH WAY

City
PHOENIXState Zip Code
AZ 85022FEC ID number of contributing
federal political committee.

C

Name of Employer

United HealthCare Services Inc

Occupation

Associate General Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

520.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 31 2011

Transaction ID : PR2119493526946

Amount of Each Receipt this Period

260.00

P/R Deduction (\$20.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. GREGORY WRIGHT

Mailing Address 13901 MAUVE DRIVE

City
SANTA ANAState Zip Code
CA 92705FEC ID number of contributing
federal political committee.

C

Name of Employer

United HealthCare Services Inc

Occupation

VP Operations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 31 2011

Transaction ID : PR2119494126946

Amount of Each Receipt this Period

325.00

P/R Deduction (\$25.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. GEORGE M YOUNG

Mailing Address 36296 N 98TH WAY

City
SCOTTSDALEState Zip Code
AZ 85262FEC ID number of contributing
federal political committee.

C

Name of Employer

United HealthCare Services Inc

Occupation

Executive Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

390.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 31 2011

Transaction ID : PR2119494426946

Amount of Each Receipt this Period

195.00

P/R Deduction (\$15.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

780.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. STEVEN C YOUNG

Mailing Address 10765 QUAIL CREEK DRIVE EAST

City State Zip Code
 PARKER CO 80138

FEC ID number of contributing federal political committee.

C

Name of Employer

United HealthCare Services Inc

Occupation

SB Account Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 12 31 2011

Transaction ID : PR2119494526946

Amount of Each Receipt this Period

130.00

P/R Deduction (\$10.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. FORREST G BURKE

Mailing Address 380 LEAF STREET

City State Zip Code
 ORONO MN 55356

FEC ID number of contributing federal political committee.

C

Name of Employer

United HealthCare Services Inc

Occupation

President PS Labor & Trust

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 12 31 2011

Transaction ID : PR2133132426946

Amount of Each Receipt this Period

1300.00

P/R Deduction (\$100.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. WILLIAM R COLEMAN

Mailing Address 831 RATLEY ROAD

City State Zip Code
 WEST SUFFIELD CT 06093

FEC ID number of contributing federal political committee.

C

Name of Employer

United HealthCare Services Inc

Occupation

Dir Claims

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

312.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 12 31 2011

Transaction ID : PR2133132526946

Amount of Each Receipt this Period

156.00

P/R Deduction (\$12.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

1586.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. DANIEL M CUMMINGS

Mailing Address 1929 FAIRMOUNT AVE

City
SAINT PAUL

State Zip Code
MN 55105

FEC ID number of contributing
federal political committee.

C

Name of Employer
United HealthCare Services Inc

Occupation
Dir Finance

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

390.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 31 2011

Transaction ID : PR2133132626946

Amount of Each Receipt this Period

195.00

P/R Deduction (\$15.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. CHARLES W HANSON

Mailing Address 4133 WHITE OAK LN

City
EXCELSIOR

State Zip Code
MN 55331

FEC ID number of contributing
federal political committee.

C

Name of Employer
United HealthCare Services Inc

Occupation
VP Underwriting

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 31 2011

Transaction ID : PR2133133126946

Amount of Each Receipt this Period

325.00

P/R Deduction (\$0.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. BROR O HULTGREN

Mailing Address 408 22ND ST

City
GOLDEN

State Zip Code
CO 80401

FEC ID number of contributing
federal political committee.

C

Name of Employer
United HealthCare Services Inc

Occupation
VP Operations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

999.96

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 31 2011

Transaction ID : PR2133133226946

Amount of Each Receipt this Period

499.98

P/R Deduction (\$38.46 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1019.98

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. CAROLYN MAGILL HANSON

Mailing Address 1 ALEXANDER STREET
#1201

City State Zip Code
YONKERS NY 10701

FEC ID number of contributing
federal political committee.

C

Name of Employer

United HealthCare Services Inc

Occupation

Dir General Management

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

499.98

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 31 2011

Transaction ID : PR2133133526946

Amount of Each Receipt this Period

249.99

P/R Deduction (\$19.23 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. ALLEN D MILLER

Mailing Address 6209 CRESCENT DRIVE

City State Zip Code
EDINA MN 55436

FEC ID number of contributing
federal political committee.

C

Name of Employer

United HealthCare Services Inc

Occupation

Regional Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

910.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 31 2011

Transaction ID : PR2133133626946

Amount of Each Receipt this Period

455.00

P/R Deduction (\$35.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. SUSAN C MORISATO

Mailing Address 238 ARDMORE ROAD

City State Zip Code
DES PLAINES IL 60016

FEC ID number of contributing
federal political committee.

C

Name of Employer

United HealthCare Services Inc

Occupation

President Insurance Solutions

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3900.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 31 2011

Transaction ID : PR2133133826946

Amount of Each Receipt this Period

1950.00

P/R Deduction (\$150.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

2654.99

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. KIMBERLY ALLENE NETTLETON

Mailing Address 5003 DARNELL

City
HOUSTON

State Zip Code
TX 77096

FEC ID number of contributing
federal political committee.

C

Name of Employer
United HealthCare Services Inc

Occupation
Dir General Management

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

390.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 31 2011

Transaction ID : PR2133133926946

Amount of Each Receipt this Period

195.00

P/R Deduction (\$15.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. T JEFFREY PUTNAM

Mailing Address 303 ELMWOOD PLACE WEST

City
MINNEAPOLIS

State Zip Code
MN 55419

FEC ID number of contributing
federal political committee.

C

Name of Employer
United HealthCare Services Inc

Occupation
SVP Financial Plng & Analysis

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4999.80

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 31 2011

Transaction ID : PR2133134226946

Amount of Each Receipt this Period

2499.90

P/R Deduction (\$192.30 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. DIANE M SCHIMMELBUSCH

Mailing Address 2203 RIVER FALLS DRIVE

City
KINGWOOD

State Zip Code
TX 77339

FEC ID number of contributing
federal political committee.

C

Name of Employer
United HealthCare Services Inc

Occupation
Dir Medical & Clinical Ops

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 31 2011

Transaction ID : PR2133134626946

Amount of Each Receipt this Period

325.00

P/R Deduction (\$25.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

3019.90

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. ANITA W SHIELS

Mailing Address 7729 KENSINGTON MANOR LANE

City State Zip Code
 WAKE FOREST NC 27587

FEC ID number of contributing federal political committee.

C

Name of Employer

United HealthCare Services Inc

Occupation

VP General Management

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 12 31 2011

Transaction ID : PR2133134726946

Amount of Each Receipt this Period

130.00

P/R Deduction (\$10.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. DANIEL M COLE

Mailing Address 9790 FOXWORTH DRIVE

City State Zip Code
 JOHNS CREEK GA 30022

FEC ID number of contributing federal political committee.

C

Name of Employer

United HealthCare Services Inc

Occupation

UHC Sales RVP - KA & SB

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 12 31 2011

Transaction ID : PR2145728326946

Amount of Each Receipt this Period

130.00

P/R Deduction (\$10.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. ROBERT C FALKENBERG

Mailing Address 6069 WEATHERED OAK CT

City State Zip Code
 WESTERVILLE OH 43082

FEC ID number of contributing federal political committee.

C

Name of Employer

United HealthCare Services Inc

Occupation

Health Plan CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

999.96

Date of Receipt

M M / D D / Y Y Y Y Y Y
 12 31 2011

Transaction ID : PR2145728426946

Amount of Each Receipt this Period

499.98

P/R Deduction (\$38.46 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

759.98

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. ROB FARAHANI

Mailing Address PO BOX 704

City	State	Zip Code
HUNTINGTON	NY	11743

FEC ID number of contributing federal political committee.

C

Name of Employer

United HealthCare Services Inc

Occupation

Dir IT Project Mgmt

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

999.96

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
12			31			2011					

Transaction ID : PR2145728526946

Amount of Each Receipt this Period

499.98

P/R Deduction (\$38.46 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. CARL T KIDD

Mailing Address 12210 OYSTER COVE COURT

City	State	Zip Code
STAFFORD	TX	77477

FEC ID number of contributing federal political committee.

C

Name of Employer

United HealthCare Services Inc

Occupation

Dir Client Svc Acct Mgt

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

663.55

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
12			31			2011					

Transaction ID : PR2145728826946

Amount of Each Receipt this Period

288.50

P/R Deduction (\$28.85 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. NANCY E LINDIMORE

Mailing Address 8256 SNEAD WAY

City	State	Zip Code
WESTERVILLE	OH	43082

FEC ID number of contributing federal political committee.

C

Name of Employer

United HealthCare Services Inc

Occupation

KA Dir Acct Mgmt

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

520.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
12			31			2011					

Transaction ID : PR2145728926946

Amount of Each Receipt this Period

260.00

P/R Deduction (\$20.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

1048.48

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. WILLIAM Y MICKLE

Mailing Address 8 DURANGO COURT

City

ALISO VIEJO

State

CA

Zip Code

92656

FEC ID number of contributing
federal political committee.

C

Name of Employer

United HealthCare Services Inc

Occupation

Business Segment CAO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 31 / 2011

Transaction ID : PR2145729126946

Amount of Each Receipt this Period

130.00

P/R Deduction (\$10.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. WAYNE MILLER

Mailing Address 19521 SIERRA SOTO RD

City

IRVINE

State

CA

Zip Code

92603

FEC ID number of contributing
federal political committee.

C

Name of Employer

United HealthCare Services Inc

Occupation

RVP Client Mgmt & Svc

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

520.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 31 / 2011

Transaction ID : PR2145729226946

Amount of Each Receipt this Period

260.00

P/R Deduction (\$20.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. LEAH C RUMMEL

Mailing Address 12100 TRAUTWEIN ROAD

City

AUSTIN

State

TX

Zip Code

78737

FEC ID number of contributing
federal political committee.

C

Name of Employer

United HealthCare Services Inc

Occupation

Dir Govt Rel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

390.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 31 / 2011

Transaction ID : PR2145729526946

Amount of Each Receipt this Period

195.00

P/R Deduction (\$15.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

585.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. MICHAEL P SCHWARZ

Mailing Address 13935 WOODRIDGE PATH

City
SAVAGE

State Zip Code
MN 55378

FEC ID number of contributing
federal political committee.

C

Name of Employer

United HealthCare Services Inc

Occupation

VP General Management

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

910.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 31 2011

Transaction ID : PR2145729726946

Amount of Each Receipt this Period

455.00

P/R Deduction (\$35.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. DANNETTE L SMITH

Mailing Address 5414 BYSCANE LANE

City
MINNETONKA

State Zip Code
MN 55345

FEC ID number of contributing
federal political committee.

C

Name of Employer

United HealthCare Services Inc

Occupation

Sr Deputy General Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3310.36

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 31 2011

Transaction ID : PR2145729926946

Amount of Each Receipt this Period

1810.42

P/R Deduction (\$193.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. RANDALL SMITH

Mailing Address 20607 BROADWATER DRIVE

City
LAND O LAKES

State Zip Code
FL 34638

FEC ID number of contributing
federal political committee.

C

Name of Employer

United HealthCare Services Inc

Occupation

VP General Management

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.04

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 31 2011

Transaction ID : PR2145730026946

Amount of Each Receipt this Period

150.02

P/R Deduction (\$11.54 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

2415.44

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. MARGARET W WEAR

Mailing Address 44 TOPANGA

City State Zip Code
 IRVINE CA 92602

FEC ID number of contributing
federal political committee.

C

Name of Employer
 United HealthCare Services Inc

Occupation
 VP Actuary

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 12 31 2011

Transaction ID : PR2145730226946

Amount of Each Receipt this Period

650.00

P/R Deduction (\$50.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. MARYNELL F BENSON

Mailing Address 604 ROCKBOURNE MILLS COURT

City State Zip Code
 WALLINGFORD PA 19086

FEC ID number of contributing
federal political committee.

C

Name of Employer
 United HealthCare Services Inc

Occupation
 Executive Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 12 31 2011

Transaction ID : PR2162866926946

Amount of Each Receipt this Period

130.00

P/R Deduction (\$10.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. DAVID A SPIVACK

Mailing Address 37 HIDDEN TRAIL

City State Zip Code
 IRVINE CA 92603

FEC ID number of contributing
federal political committee.

C

Name of Employer
 United HealthCare Services Inc

Occupation
 SVP Business Operations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4999.80

Date of Receipt

M M / D D / Y Y Y Y Y Y
 12 31 2011

Transaction ID : PR2162867626946

Amount of Each Receipt this Period

2499.90

P/R Deduction (\$192.30 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

3279.90

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. KURT C LEWIS

Mailing Address 961 RIVER FOREST DRIVE

City State Zip Code
 MAINEVILLE OH 45039

FEC ID number of contributing federal political committee.

C

Name of Employer

United HealthCare Services Inc

Occupation

KA VP Sales and Account Mgmt

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.04

Date of Receipt

M M / D D / Y Y Y Y Y Y
 12 31 2011

Transaction ID : PR2203967526946

Amount of Each Receipt this Period

150.02

P/R Deduction (\$11.54 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. CHRISTINE W GIBSON

Mailing Address 8516 29TH AVE N

City State Zip Code
 NEW HOPE MN 55427

FEC ID number of contributing federal political committee.

C

Name of Employer

United HealthCare Services Inc

Occupation

VP Strategic Initiatives

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2999.88

Date of Receipt

M M / D D / Y Y Y Y Y Y
 12 31 2011

Transaction ID : PR2225166726946

Amount of Each Receipt this Period

1499.94

P/R Deduction (\$115.38 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. ANDREW M SLAVITT

Mailing Address 5125 MIRROR LAKES DRIVE

City State Zip Code
 EDINA MN 55436

FEC ID number of contributing federal political committee.

C

Name of Employer

United HealthCare Services Inc

Occupation

Business Segment CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4999.90

Date of Receipt

M M / D D / Y Y Y Y Y Y
 12 31 2011

Transaction ID : PR2225167426946

Amount of Each Receipt this Period

1749.90

P/R Deduction (\$250.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

3399.86

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. JEAN-FRANCOIS BEAULE

Mailing Address 7 STRATFORD RD

City

FARMINGTON

State

CT

Zip Code

06032

FEC ID number of contributing
federal political committee.

C

Name of Employer

United HealthCare Services Inc

Occupation

VP General Management

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1442.50

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 31 / 2011

Transaction ID : PR2225813626946

Amount of Each Receipt this Period

692.40

P/R Deduction (\$57.70 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. NANCY S MACK

Mailing Address 10140 26TH AVENUE NORTH

City

PLYMOUTH

State

MN

Zip Code

55441

FEC ID number of contributing
federal political committee.

C

Name of Employer

United HealthCare Services Inc

Occupation

Dir IT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

390.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 31 / 2011

Transaction ID : PR2225818426946

Amount of Each Receipt this Period

195.00

P/R Deduction (\$15.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. CHARLES W MARTEL

Mailing Address 676 LAKE SUSAN HILLS DRIVE

City

CHANHASSEN

State

MN

Zip Code

55317

FEC ID number of contributing
federal political committee.

C

Name of Employer

United HealthCare Services Inc

Occupation

Dir IT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 31 / 2011

Transaction ID : PR2225818626946

Amount of Each Receipt this Period

-10.00

P/R Deduction (\$10.00 Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

877.40

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. MICHAEL MCGUIRE

Mailing Address 437 DRURY LANE

City
WYCKOFF

State Zip Code
NJ 07481

FEC ID number of contributing
federal political committee.

C

Name of Employer
United HealthCare Services Inc

Occupation
Health Plan CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

520.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 31 2011

Transaction ID : PR2225818826946

Amount of Each Receipt this Period

260.00

P/R Deduction (\$20.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. ERIC S RANGEN

Mailing Address 15348 RED OAKS ROAD SE

City
PRIOR LAKE

State Zip Code
MN 55372

FEC ID number of contributing
federal political committee.

C

Name of Employer
United HealthCare Services Inc

Occupation
SVP Chief Accounting Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4999.80

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 31 2011

Transaction ID : PR2225819326946

Amount of Each Receipt this Period

2499.90

P/R Deduction (\$192.30 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. JOHN D RYAN

Mailing Address 45 WESTMORELAND LN

City
NAPERVILLE

State Zip Code
IL 60540

FEC ID number of contributing
federal political committee.

C

Name of Employer
United HealthCare Services Inc

Occupation
RVP Client Mgmt & Svc

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

999.96

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 31 2011

Transaction ID : PR2225819626946

Amount of Each Receipt this Period

499.98

P/R Deduction (\$38.46 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

3259.88

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. ROY THOMAS SAILOR

Mailing Address 276 COYOTE WILLOW DRIVE

City State Zip Code
 COLORADO SPRINGS CO 80921

FEC ID number of contributing federal political committee.

C

Name of Employer

United HealthCare Services Inc

Occupation

Dir Client Svc Acct Mgt

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1001.04

Date of Receipt

M M / D D / Y Y Y Y Y Y
 12 31 2011

Transaction ID : PR2225819726946

Amount of Each Receipt this Period

962.04

P/R Deduction (\$76.92 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. KAREN A DIPALMO

Mailing Address 7533 PRAIRIE VIEW DR

City State Zip Code
 INDIANAPOLIS IN 46256

FEC ID number of contributing federal political committee.

C

Name of Employer

Golden Rule Financial Corp.

Occupation

Dir Network Programs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

780.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 12 31 2011

Transaction ID : PR2231347226946

Amount of Each Receipt this Period

390.00

P/R Deduction (\$30.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. JEFFERY A DROZDA

Mailing Address 9765 GRACE LANE

City State Zip Code
 CLINTON LA 70722

FEC ID number of contributing federal political committee.

C

Name of Employer

United HealthCare Services Inc

Occupation

Govt Rel Assoc Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1040.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 12 31 2011

Transaction ID : PR2231347426946

Amount of Each Receipt this Period

520.00

P/R Deduction (\$40.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

1872.04

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. SUSAN A FOWLER

Mailing Address 4396 CREEKSIDE PASS

City
ZIONSVILLE

State Zip Code
IN 46077

FEC ID number of contributing
federal political committee.

C

Name of Employer
Golden Rule Financial Corp.

Occupation
VP UHO Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

390.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 31 2011

Transaction ID : PR2231349726946

Amount of Each Receipt this Period

195.00

P/R Deduction (\$15.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. KASIA HANNA

Mailing Address 1419 HORNADAY RD

City
BROWNSBURG

State Zip Code
IN 46112

FEC ID number of contributing
federal political committee.

C

Name of Employer
Golden Rule Insurance Company

Occupation
Sr IT Project Cnsltnt

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 31 2011

Transaction ID : PR2231350626946

Amount of Each Receipt this Period

130.00

P/R Deduction (\$10.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. MARGARET C HAYS

Mailing Address 507 WOODLAND W DRIVE

City
GREENFIELD

State Zip Code
IN 46140

FEC ID number of contributing
federal political committee.

C

Name of Employer
Golden Rule Insurance Company

Occupation
Dir Claims

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 31 2011

Transaction ID : PR2231350726946

Amount of Each Receipt this Period

130.00

P/R Deduction (\$10.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

455.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. KIP J METHENY

Mailing Address 808 JEFFERSON

City State Zip Code
 LAWRENCEVILLE IL 62439

FEC ID number of contributing federal political committee.

C

Name of Employer

Golden Rule Insurance Company

Occupation

Spvsr Claims

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 12 31 2011

Transaction ID : PR2231351426946

Amount of Each Receipt this Period

130.00

P/R Deduction (\$10.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. PAMELA ANN MOORE

Mailing Address RR 1 BOX 282A

City State Zip Code
 BRIDGEPORT IL 62417

FEC ID number of contributing federal political committee.

C

Name of Employer

Golden Rule Insurance Company

Occupation

Mgr Facilities

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

257.40

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 12 31 2011

Transaction ID : PR2231351726946

Amount of Each Receipt this Period

128.70

P/R Deduction (\$9.90 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. DONALD M MUDGETT

Mailing Address 8131 LAKE POINT WAY

City State Zip Code
 INDIANAPOLIS IN 46256

FEC ID number of contributing federal political committee.

C

Name of Employer

Golden Rule Financial Corp.

Occupation

Assoc Dir General Management

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

436.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 12 31 2011

Transaction ID : PR2231351926946

Amount of Each Receipt this Period

182.00

P/R Deduction (\$14.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

440.70

TOTAL This Period (last page this line number only)..... ►

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Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. ANDREW L PEARSON

Mailing Address 7371 OAKLAND HILLS CIR

City State Zip Code
 INDIANAPOLIS IN 46236

FEC ID number of contributing federal political committee.

C

Name of Employer

Golden Rule Insurance Company

Occupation

Mgr IT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 12 31 2011

Transaction ID : PR2231352026946

Amount of Each Receipt this Period

130.00

P/R Deduction (\$10.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. JILL PHELPS

Mailing Address 95 KENSINGTON CT

City State Zip Code
 PITTSBORO IN 46167

FEC ID number of contributing federal political committee.

C

Name of Employer

Golden Rule Insurance Company

Occupation

Sr IT Business Analyst

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 12 31 2011

Transaction ID : PR2231352126946

Amount of Each Receipt this Period

130.00

P/R Deduction (\$10.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. DARRELL S RICHEY

Mailing Address 7244 TULIPTREE TRAIL

City State Zip Code
 INDIANAPOLIS IN 46256

FEC ID number of contributing federal political committee.

C

Name of Employer

Golden Rule Financial Corp.

Occupation

Deputy General Counsel (Mgr)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2080.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 12 31 2011

Transaction ID : PR2231352326946

Amount of Each Receipt this Period

1040.00

P/R Deduction (\$80.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1300.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. JANET SUE SELF

Mailing Address 3202 BABSON CT

City
INDIANAPOLIS

State Zip Code
IN 46268

FEC ID number of contributing
federal political committee.

C

Name of Employer

Golden Rule Financial Corp.

Occupation

Dir Actuarial Services

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

390.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 31 2011

Transaction ID : PR2231352426946

Amount of Each Receipt this Period

195.00

P/R Deduction (\$15.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. AMANDA JANE WINKLE

Mailing Address 704 EAST MAIN STREET

City
CARMEL

State Zip Code
IN 46032

FEC ID number of contributing
federal political committee.

C

Name of Employer

Golden Rule Insurance Company

Occupation

UHO Director National Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 31 2011

Transaction ID : PR2231352526946

Amount of Each Receipt this Period

130.00

P/R Deduction (\$10.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. MICHAEL R CONNLY

Mailing Address 570 MONTCALM PL

City
SAINT PAUL

State Zip Code
MN 55116

FEC ID number of contributing
federal political committee.

C

Name of Employer

United HealthCare Services Inc

Occupation

Chief Technology Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 31 2011

Transaction ID : PR2247625826946

Amount of Each Receipt this Period

1300.00

P/R Deduction (\$100.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1625.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. SHANKAR RAO

Mailing Address 10622 EQUESTRIAN DR

City State Zip Code
 COWAN HEIGHTS CA 92705

FEC ID number of contributing
federal political committee.

C

Name of Employer
 United HealthCare Services Inc

Occupation
 VP IT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

249.86

Date of Receipt

M M / D D / Y Y Y Y Y Y
 12 31 2011

Transaction ID : PR2247626326946

Amount of Each Receipt this Period

124.93

P/R Deduction (\$9.61 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. JOSEPH R CARCIONE JR

Mailing Address 11 CARRIAGE WAY

City State Zip Code
 WHITE PLAINS NY 10605

FEC ID number of contributing
federal political committee.

C

Name of Employer
 United HealthCare Services Inc

Occupation
 Medical Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.20

Date of Receipt

M M / D D / Y Y Y Y Y Y
 12 31 2011

Transaction ID : PR2247626826946

Amount of Each Receipt this Period

750.10

P/R Deduction (\$57.70 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. KEVIN DAVID KANTOLA

Mailing Address 7031 HALSTEAD DRIVE

City State Zip Code
 MINNETRISTA MN 55364

FEC ID number of contributing
federal political committee.

C

Name of Employer
 United HealthCare Services Inc

Occupation
 Dir IT Architecture

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 12 31 2011

Transaction ID : PR2247627026946

Amount of Each Receipt this Period

325.00

P/R Deduction (\$25.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1200.03

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. DENNIS P O'BRIEN

Mailing Address 61 LOUGHLIN AVE

City

COS COB

State

CT

Zip Code

06807

FEC ID number of contributing
federal political committee.

C

Name of Employer

United HealthCare Services Inc

Occupation

RVP Network Mgmt

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.20

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 31 / 2011

Transaction ID : PR2247627326946

Amount of Each Receipt this Period

750.10

P/R Deduction (\$57.70 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. JEFFERY RICHARD VERNEY

Mailing Address 266 WESTLEDGE ROAD

City

WEST SIMSBURY

State

CT

Zip Code

06092

FEC ID number of contributing
federal political committee.

C

Name of Employer

United HealthCare Services Inc

Occupation

VP General Management

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.20

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 31 / 2011

Transaction ID : PR2247627426946

Amount of Each Receipt this Period

750.10

P/R Deduction (\$57.70 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. DARRELL BROOKS

Mailing Address 425 QUEENSLAND LANE NORTH

City

PLYMOUTH

State

MN

Zip Code

55447

FEC ID number of contributing
federal political committee.

C

Name of Employer

United HealthCare Services Inc

Occupation

VP Information Technology

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.20

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 31 / 2011

Transaction ID : PR2247627626946

Amount of Each Receipt this Period

750.10

P/R Deduction (\$57.70 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

2250.30

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. SANJAY GARODIA

Mailing Address 282 MIDDAUGH

City

CLARENDON HILLS

State

IL

Zip Code

60514

FEC ID number of contributing
federal political committee.

C

Name of Employer

United HealthCare Services Inc

Occupation

COO IBS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

999.96

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 31 / 2011

Transaction ID : PR2247627826946

Amount of Each Receipt this Period

499.98

P/R Deduction (\$38.46 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. JACQUELINE B KOSECOFF

Mailing Address 1474 BIENVENEDA AVE

City

PACIFIC PALISADES

State

CA

Zip Code

90272

FEC ID number of contributing
federal political committee.

C

Name of Employer

United HealthCare Services Inc

Occupation

Business Segment CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4999.80

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 31 / 2011

Transaction ID : PR2247627926946

Amount of Each Receipt this Period

2499.90

P/R Deduction (\$192.30 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. DANIEL L OHMAN

Mailing Address 8970 MOOR PARK RUN

City

DULUTH

State

GA

Zip Code

30097

FEC ID number of contributing
federal political committee.

C

Name of Employer

United HealthCare Services Inc

Occupation

Region CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

699.92

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 31 / 2011

Transaction ID : PR2247628026946

Amount of Each Receipt this Period

349.96

P/R Deduction (\$26.92 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

3349.84

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. JEFFREY J CRUMBAUGH

Mailing Address 226 25TH ST DR SE

City

CEDAR RAPIDS

State

IA

Zip Code

52403

FEC ID number of contributing
federal political committee.

C

Name of Employer

United HealthCare Services Inc

Occupation

M&R Sales Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

288.28

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 31 / 2011

Transaction ID : PR2259635226946

Amount of Each Receipt this Period

182.00

P/R Deduction (\$14.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. JOHN M PRINCE

Mailing Address 546 HARRINGTON ROAD

City

WAYZATA

State

MN

Zip Code

55391

FEC ID number of contributing
federal political committee.

C

Name of Employer

United HealthCare Services Inc

Occupation

Market Group CFO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2522.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 31 / 2011

Transaction ID : PR2259738426946

Amount of Each Receipt this Period

1261.00

P/R Deduction (\$97.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. CHRISTOPHER L CRONN

Mailing Address 507 PRESSLER #3128

City

AUSTIN

State

TX

Zip Code

78703

FEC ID number of contributing
federal political committee.

C

Name of Employer

United HealthCare Services Inc

Occupation

Govt Rel Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

999.96

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 31 / 2011

Transaction ID : PR2270522926946

Amount of Each Receipt this Period

499.98

P/R Deduction (\$38.46 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1942.98

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. KAREN R FINNERTY

Mailing Address 4430 PARK POINT

City State Zip Code
 LEWIS CENTER OH 43035

FEC ID number of contributing
federal political committee.

C

Name of Employer
United HealthCare Services Inc

Occupation
Dir General Management

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 12 31 2011

Transaction ID : PR2270546626946

Amount of Each Receipt this Period

130.00

P/R Deduction (\$10.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. SIMON L STEVENS

Mailing Address 1716 EMERSON AVENUE SOUTH

City State Zip Code
 MINNEAPOLIS MN 55403

FEC ID number of contributing
federal political committee.

C

Name of Employer
United HealthCare Services Inc

Occupation
EVP UnitedHealth Group

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4999.90

Date of Receipt

M M / D D / Y Y Y Y Y Y
 12 31 2011

Transaction ID : PR2364863226946

Amount of Each Receipt this Period

4999.90

P/R Deduction (\$833.34 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. JEANNE M DE SA

Mailing Address 3000 TILDEN STREET NW #204-1

City State Zip Code
 WASHINGTON DC 20008

FEC ID number of contributing
federal political committee.

C

Name of Employer
United HealthCare Services Inc

Occupation
Govt Rel Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 12 31 2011

Transaction ID : PR2402315926946

Amount of Each Receipt this Period

650.00

P/R Deduction (\$50.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

5779.90

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. DONALD D JACOBS

Mailing Address 19495 VINE RIDGE ROAD

City State Zip Code
 SHOREWOOD MN 55331

FEC ID number of contributing federal political committee.

C

Name of Employer

United HealthCare Services Inc

Occupation

Sr Project Manager II

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 12 31 2011

Transaction ID : PR2402317326946

Amount of Each Receipt this Period

130.00

P/R Deduction (\$10.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. ANGELA DAWN KEPLEY CARRIER

Mailing Address 3219 PENINSULA DRIVE

City State Zip Code
 JAMESTOWN NC 27282

FEC ID number of contributing federal political committee.

C

Name of Employer

United HealthCare Services Inc

Occupation

Dir Case Mgmt

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

520.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 12 31 2011

Transaction ID : PR2402317726946

Amount of Each Receipt this Period

260.00

P/R Deduction (\$20.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. MARILYN LEVI-BAUMGARTEN

Mailing Address 4800 W 27TH ST

City State Zip Code
 SAINT LOUIS PARK MN 55416

FEC ID number of contributing federal political committee.

C

Name of Employer

United HealthCare Services Inc

Occupation

Dir General Management

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

520.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 12 31 2011

Transaction ID : PR2402317926946

Amount of Each Receipt this Period

260.00

P/R Deduction (\$20.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

650.00

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. JAKE LOGAN

Mailing Address 5520 CHEERY LYNN ROAD

City State Zip Code
 PHOENIX AZ 85018

FEC ID number of contributing
federal political committee.

C

Name of Employer
 United HealthCare Services Inc

Occupation
 Govt Rel Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 12 31 2011

Transaction ID : PR2402318226946

Amount of Each Receipt this Period

325.00

P/R Deduction (\$25.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. MARIA MCCAULEY

Mailing Address 15916 MARSHFIELD DRIVE

City State Zip Code
 TAMPA FL 33624

FEC ID number of contributing
federal political committee.

C

Name of Employer
 United HealthCare Services Inc

Occupation
 Sr Project Manager II

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

520.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 12 31 2011

Transaction ID : PR2402318426946

Amount of Each Receipt this Period

260.00

P/R Deduction (\$20.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. STACY S MCGRATH

Mailing Address 5625 CHOWEN AVE S

City State Zip Code
 EDINA MN 55410

FEC ID number of contributing
federal political committee.

C

Name of Employer
 United HealthCare Services Inc

Occupation
 Dir Business Process

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

390.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 12 31 2011

Transaction ID : PR2402318526946

Amount of Each Receipt this Period

195.00

P/R Deduction (\$15.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

780.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. RICHARD W MOCKLER

Mailing Address 2113 13TH AVE SOUTH

City State Zip Code
SEATTLE WA 98144

FEC ID number of contributing federal political committee.

C

Name of Employer
United HealthCare Services Inc

Occupation
VP Bus Dvlp

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 31 2011

Transaction ID : PR2402318726946

Amount of Each Receipt this Period

130.00

P/R Deduction (\$10.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. ANDREA MORRISON DAVIS

Mailing Address 2 LAKESHIRE COURT

City State Zip Code
OWINGS MILLS MD 21117

FEC ID number of contributing federal political committee.

C

Name of Employer
United HealthCare Services Inc

Occupation
Acct Mgt Cons Client Svc

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 31 2011

Transaction ID : PR2402318926946

Amount of Each Receipt this Period

130.00

P/R Deduction (\$10.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. JILL RIVERS

Mailing Address 6648 DASHER COURT

City State Zip Code
COLUMBIA MD 21045

FEC ID number of contributing federal political committee.

C

Name of Employer
United HealthCare Services Inc

Occupation
Director HHS Consulting

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 31 2011

Transaction ID : PR2402319526946

Amount of Each Receipt this Period

75.00

P/R Deduction (\$25.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

335.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. KATHERINE E SHERWIN

Mailing Address 85 CENTRAL AVE

City
NEWTON

State Zip Code
MA 02460

FEC ID number of contributing
federal political committee.

C

Name of Employer

United HealthCare Services Inc

Occupation

Bus Adv/Tech Consltg Assoc Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 31 2011

Transaction ID : PR2402319926946

Amount of Each Receipt this Period

130.00

P/R Deduction (\$10.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. DIANE D SOUZA

Mailing Address 360 STANLEY DRIVE

City
GLASTONBURY

State Zip Code
CT 06033

FEC ID number of contributing
federal political committee.

C

Name of Employer

United HealthCare Services Inc

Occupation

CEO Specialty Benefits

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2692.20

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 31 2011

Transaction ID : PR2402320026946

Amount of Each Receipt this Period

2499.90

P/R Deduction (\$192.30 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. LORI SWEERE LILIENTHAL

Mailing Address 11826 GERMAINE TERRACE

City
EDEN PRAIRIE

State Zip Code
MN 55347

FEC ID number of contributing
federal political committee.

C

Name of Employer

United HealthCare Services Inc

Occupation

EVP Human Capital

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2972.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 31 2011

Transaction ID : PR2402320226946

Amount of Each Receipt this Period

1672.00

P/R Deduction (\$193.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

4301.90

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. MYLYNN K TUFTE

Mailing Address 3630 26TH ST SE

City
DAWSON

State Zip Code
ND 58428

FEC ID number of contributing
federal political committee.

C

Name of Employer
United HealthCare Services Inc

Occupation
Dir Medical & Clinical Ops

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 31 2011

Transaction ID : PR2402320326946

Amount of Each Receipt this Period

400.00

P/R Deduction (\$400.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. MICHAEL S ZENOBI

Mailing Address 1877 E CHILTON DRIVE

City
TEMPE

State Zip Code
AZ 85283

FEC ID number of contributing
federal political committee.

C

Name of Employer
United HealthCare Services Inc

Occupation
Dir Finance

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

316.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 31 2011

Transaction ID : PR2402320826946

Amount of Each Receipt this Period

182.00

P/R Deduction (\$14.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. SHELLEY WIKE CRANLEY

Mailing Address 3801 MAURICE COURT

City
LAS VEGAS

State Zip Code
NV 89108

FEC ID number of contributing
federal political committee.

C

Name of Employer
United HealthCare Services Inc

Occupation
Dir Regulatory Affairs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 31 2011

Transaction ID : PR2402444426946

Amount of Each Receipt this Period

1300.00

P/R Deduction (\$100.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1882.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. DANIEL J WEAVER

Mailing Address 7332 WOODGLEN PLACE

City State Zip Code
 CASTLE PINES CO 80108

FEC ID number of contributing federal political committee.

C

Name of Employer

United HealthCare Services Inc

Occupation

Dir General Management

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

316.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 12 31 2011

Transaction ID : PR2402444626946

Amount of Each Receipt this Period

182.00

P/R Deduction (\$14.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. JAY M ANLIKER

Mailing Address 4306 MOUNTAIN LANE

City State Zip Code
 WAUSAU WI 54401

FEC ID number of contributing federal political committee.

C

Name of Employer

United HealthCare Services Inc

Occupation

CEO TPA

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

520.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 12 31 2011

Transaction ID : PR2402445026946

Amount of Each Receipt this Period

260.00

P/R Deduction (\$20.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. JAMES C COLEMAN

Mailing Address 4135 ETHAN DRIVE

City State Zip Code
 EAGAN MN 55123

FEC ID number of contributing federal political committee.

C

Name of Employer

United HealthCare Services Inc

Occupation

SVP Employee Relations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2600.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 12 31 2011

Transaction ID : PR2402445226946

Amount of Each Receipt this Period

1300.00

P/R Deduction (\$100.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

1742.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. JAMES D DONOVAN

Mailing Address 2816 MONTREAU DRIVE

City
FRISCO

State Zip Code
TX 75034

FEC ID number of contributing
federal political committee.

C

Name of Employer
United HealthCare Services Inc

Occupation
SVP Bus Dev and Marketing

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1690.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 31 2011

Transaction ID : PR2402445326946

Amount of Each Receipt this Period

845.00

P/R Deduction (\$65.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. JOHN L LARSEN

Mailing Address 11688 TANGLEWOOD DRIVE

City
EDEN PRAIRIE

State Zip Code
MN 55347

FEC ID number of contributing
federal political committee.

C

Name of Employer
United HealthCare Services Inc

Occupation
Business Segment CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3159.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 31 2011

Transaction ID : PR2402445626946

Amount of Each Receipt this Period

2509.00

P/R Deduction (\$193.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. KARA J RIOS

Mailing Address 5116 DUGGAN PLAZA

City
EDINA

State Zip Code
MN 55439

FEC ID number of contributing
federal political committee.

C

Name of Employer
United HealthCare Services Inc

Occupation
VP Operations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4999.90

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 31 2011

Transaction ID : PR2402445726946

Amount of Each Receipt this Period

1749.90

P/R Deduction (\$250.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

5103.90

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. JOY O HIGA

Mailing Address 2208 ELM AVENUE

City State Zip Code
 MANHATTAN BEACH CA 90266

FEC ID number of contributing
federal political committee.

C

Name of Employer

United HealthCare Services Inc

Occupation

Dir Regulatory Affairs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

780.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 12 31 2011

Transaction ID : PR2402446226946

Amount of Each Receipt this Period

390.00

P/R Deduction (\$30.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. SOHINI G JINDAL

Mailing Address 9300 IVY TREE LANE

City State Zip Code
 GREAT FALLS VA 22066

FEC ID number of contributing
federal political committee.

C

Name of Employer

United HealthCare Services Inc

Occupation

Govt Rel Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 12 31 2011

Transaction ID : PR2402446326946

Amount of Each Receipt this Period

1300.00

P/R Deduction (\$100.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. RUSSELL C PETRELLA

Mailing Address 4612 MOORLAND AVENUE

City State Zip Code
 EDINA MN 55424

FEC ID number of contributing
federal political committee.

C

Name of Employer

United HealthCare Services Inc

Occupation

President C&S

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 12 31 2011

Transaction ID : PR2402446426946

Amount of Each Receipt this Period

1300.00

P/R Deduction (\$0.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

2990.00

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. CORY ALEXANDER

Mailing Address 4203 BRADLEY LANE

City State Zip Code
 CHEVY CHASE MD 20815

FEC ID number of contributing federal political committee.

C

Name of Employer

United HealthCare Services Inc

Occupation

VP Gov't Relations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4999.80

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 12 31 2011

Transaction ID : PR2405428826946

Amount of Each Receipt this Period

2499.90

P/R Deduction (\$192.30 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. CHRIS A SCHERER

Mailing Address 1044 ST JAMES PARK AVE

City State Zip Code
 MONROE MI 48161

FEC ID number of contributing federal political committee.

C

Name of Employer

United HealthCare Services Inc

Occupation

VP Operations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 12 31 2011

Transaction ID : PR2405429026946

Amount of Each Receipt this Period

130.00

P/R Deduction (\$10.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. JOSEPH R STEVENS

Mailing Address 1621 BERKSHIRE RD

City State Zip Code
 COLUMBUS OH 43221

FEC ID number of contributing federal political committee.

C

Name of Employer

United HealthCare Services Inc

Occupation

Govt Rel Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1237.60

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 12 31 2011

Transaction ID : PR2405429126946

Amount of Each Receipt this Period

618.80

P/R Deduction (\$47.60 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

3248.70

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. RODNEY CHARLES ARMSTEAD

Mailing Address 406 LEWELEN CIRCLE

City State Zip Code
 ENGLEWOOD NJ 07631

FEC ID number of contributing federal political committee.

C

Name of Employer

United HealthCare Services Inc

Occupation

VP Operations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1040.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 12 31 2011

Transaction ID : PR2405430226946

Amount of Each Receipt this Period

520.00

P/R Deduction (\$40.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. KAREN ANN SAELENS

Mailing Address 105 N FLORENCE AVE

City State Zip Code
 LITCHFIELD PARK AZ 85340

FEC ID number of contributing federal political committee.

C

Name of Employer

United HealthCare Services Inc

Occupation

Dir General Management

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

520.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 12 31 2011

Transaction ID : PR2408544826946

Amount of Each Receipt this Period

260.00

P/R Deduction (\$20.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. KATHLYN G WEE

Mailing Address 4118 38TH ST NW

City State Zip Code
 WASHINGTON DC 20016

FEC ID number of contributing federal political committee.

C

Name of Employer

United HealthCare Services Inc

Occupation

Govt Rel Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

520.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 12 31 2011

Transaction ID : PR2408545026946

Amount of Each Receipt this Period

260.00

P/R Deduction (\$20.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

1040.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. GAIL KOZIARA BOUDREAUX

Mailing Address 841 HOLDEN COURT

City

LAKE FOREST

State

IL

Zip Code

60045

FEC ID number of contributing
federal political committee.

C

Name of Employer

United HealthCare Services Inc

Occupation

EVP & Gr Pres UHC

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4999.90

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 31 / 2011

Transaction ID : PR2437119526946

Amount of Each Receipt this Period

4999.80

P/R Deduction (\$192.31 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. SCOTT A BOWERS

Mailing Address 809 GADSDEN PLACE

City

FRANKLIN

State

TN

Zip Code

37067

FEC ID number of contributing
federal political committee.

C

Name of Employer

United HealthCare Services Inc

Occupation

Plan President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 31 / 2011

Transaction ID : PR2437119626946

Amount of Each Receipt this Period

130.00

P/R Deduction (\$10.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. JEFFREY SEAN CORZINE

Mailing Address 7649 EARLINGTON PARKWAY

City

DUBLIN

State

OH

Zip Code

43017

FEC ID number of contributing
federal political committee.

C

Name of Employer

United HealthCare Services Inc

Occupation

Dir General Management

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

520.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 31 / 2011

Transaction ID : PR2437119726946

Amount of Each Receipt this Period

260.00

P/R Deduction (\$20.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

5389.80

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. ANA T FUENTEVILLA

Mailing Address 4815 NORTH CAMINO ESCUELA

City
TUCSON

State Zip Code
AZ 85718

FEC ID number of contributing
federal political committee.

C

Name of Employer

United HealthCare Services Inc

Occupation

Sr Medical Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 31 2011

Transaction ID : PR2437119826946

Amount of Each Receipt this Period

130.00

P/R Deduction (\$10.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. RITA FAYE JOHNSON-MILLS

Mailing Address 9727 SKY LANE

City
EDEN PRAIRIE

State Zip Code
MN 55347

FEC ID number of contributing
federal political committee.

C

Name of Employer

United HealthCare Services Inc

Occupation

VP Operations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

390.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 31 2011

Transaction ID : PR2437120126946

Amount of Each Receipt this Period

195.00

P/R Deduction (\$15.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. DAVID K LIVINGSTON

Mailing Address 24570 RIDGE POLE COURT

City
SOUTH LYON

State Zip Code
MI 48178

FEC ID number of contributing
federal political committee.

C

Name of Employer

United HealthCare Services Inc

Occupation

Plan President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1586.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 31 2011

Transaction ID : PR2437120226946

Amount of Each Receipt this Period

1261.00

P/R Deduction (\$97.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1586.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. DAVID WILLIAM THOMAS

Mailing Address 841 LAKE ROAD

City State Zip Code
BRADFORD WOODS PA 15015

FEC ID number of contributing
federal political committee.

C

Name of Employer
United HealthCare Services Inc

Occupation
Deputy General Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 31 2011

Transaction ID : PR2437120426946

Amount of Each Receipt this Period

130.00

P/R Deduction (\$10.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. JACK S WEISS

Mailing Address 6245 NORTH 75 STREET

City State Zip Code
SCOTTSDALE AZ 85250

FEC ID number of contributing
federal political committee.

C

Name of Employer
United HealthCare Services Inc

Occupation
Natl Medical Director/CMO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 31 2011

Transaction ID : PR2437120526946

Amount of Each Receipt this Period

325.00

P/R Deduction (\$25.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. PAUL JOSEPH BALTHAZOR

Mailing Address 9013 FARNSWORTH AVENUE NORTH

City State Zip Code
BROOKLYN PARK MN 55443

FEC ID number of contributing
federal political committee.

C

Name of Employer
United HealthCare Services Inc

Occupation
Business Segment CFO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1560.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 31 2011

Transaction ID : PR2437120726946

Amount of Each Receipt this Period

780.00

P/R Deduction (\$60.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1235.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. KELLY L CLARK

Mailing Address 13540 BIRCHWOOD AVENUE

City	State	Zip Code
ROSEMOUNT	MN	55068

FEC ID number of contributing federal political committee.

C

Name of Employer

United HealthCare Services Inc

Occupation

Business Segment CIO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

999.96

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	31	/	2011

Transaction ID : PR2437121326946

Amount of Each Receipt this Period

499.98

P/R Deduction (\$38.46 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. LAURA L NESS

Mailing Address 10550 PINNACLE WAY

City	State	Zip Code
WOODBURY	MN	55129

FEC ID number of contributing federal political committee.

C

Name of Employer

United HealthCare Services Inc

Occupation

VP Operations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

767.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	31	/	2011

Transaction ID : PR2437121526946

Amount of Each Receipt this Period

507.00

P/R Deduction (\$39.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. JOHN W COSGRIFF

Mailing Address 1837 SUMMIT LANE

City	State	Zip Code
MENDOTA HEIGHTS	MN	55118

FEC ID number of contributing federal political committee.

C

Name of Employer

United HealthCare Services Inc

Occupation

Dir General Management

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	31	/	2011

Transaction ID : PR2437121626946

Amount of Each Receipt this Period

500.00

P/R Deduction (\$40.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

1506.98

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. JOHN P BLANK

Mailing Address 1582 MEDINA RD

City
MEDINA

State Zip Code
MN 55356

FEC ID number of contributing
federal political committee.

C

Name of Employer
United HealthCare Services Inc

Occupation
VP Operations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1358.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 31 2011

Transaction ID : PR2437126926946

Amount of Each Receipt this Period

1261.00

P/R Deduction (\$97.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. PETER W RAINEY

Mailing Address 3115 WEST 47 STREET

City
MINNEAPOLIS

State Zip Code
MN 55410

FEC ID number of contributing
federal political committee.

C

Name of Employer
United HealthCare Services Inc

Occupation
VP Finance

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

507.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 31 2011

Transaction ID : PR2437127526946

Amount of Each Receipt this Period

507.00

P/R Deduction (\$39.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. ROBIN E LIPPERT

Mailing Address 522 4 STREET SOUTH EAST

City
WASHINGTON

State Zip Code
DC 20003

FEC ID number of contributing
federal political committee.

C

Name of Employer
United HealthCare Services Inc

Occupation
Dir Govt Rel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4999.90

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 31 2011

Transaction ID : PR2439928026946

Amount of Each Receipt this Period

2940.38

P/R Deduction (\$192.31 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

4708.38

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. STEPHEN M HEYMAN

Mailing Address 5300 SHERRILL AVENUE

City State Zip Code
 CHEVY CHASE MD 20815

FEC ID number of contributing
federal political committee.

C

Name of Employer
 United HealthCare Services Inc

Occupation
 VP Govt Rel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 12 31 2011

Transaction ID : PR2444265726946

Amount of Each Receipt this Period

1300.00

P/R Deduction (\$100.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. DEWAYNE E ULLSPERGER

Mailing Address 4440 AVONDALE

City State Zip Code
 MINNETONKA MN 55345

FEC ID number of contributing
federal political committee.

C

Name of Employer
 United HealthCare Services Inc

Occupation
 VP Actuary

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 12 31 2011

Transaction ID : PR2444561326946

Amount of Each Receipt this Period

2500.00

P/R Deduction (\$2500.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. JAMES E MURPHY

Mailing Address 150 PORTLAND AVENUE UNIT 603

City State Zip Code
 MINNEAPOLIS MN 55401

FEC ID number of contributing
federal political committee.

C

Name of Employer
 United HealthCare Services Inc

Occupation
 Business Segment COO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 12 31 2011

Transaction ID : PR2444561426946

Amount of Each Receipt this Period

2500.00

P/R Deduction (\$2500.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

6300.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. DANNA L MEZIN

Mailing Address 1059 HIGHWAY 12

City
ROBERTS

State Zip Code
WI 54023

FEC ID number of contributing
federal political committee.

C

Name of Employer
United HealthCare Services Inc

Occupation
Business Segment COO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 31 2011

Transaction ID : PR2444561526946

Amount of Each Receipt this Period

2500.00

P/R Deduction (\$2500.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. LORI C MCDOUGAL

Mailing Address 19705 LAKEVIEW AVENUE

City
DEEPHAVEN

State Zip Code
MN 55331

FEC ID number of contributing
federal political committee.

C

Name of Employer
United HealthCare Services Inc

Occupation
CEO - UMVS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4999.80

Date of Receipt

M M / D D / Y Y Y Y Y
12 31 2011

Transaction ID : PR2445015326946

Amount of Each Receipt this Period

2499.90

P/R Deduction (\$192.30 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. DONALD S LANGER

Mailing Address 177 SOUTHBOROUGH ROAD

City
SOUTHINGTON

State Zip Code
CT 06489

FEC ID number of contributing
federal political committee.

C

Name of Employer
United HealthCare Services Inc

Occupation
Plan President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

520.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 31 2011

Transaction ID : PR2445015426946

Amount of Each Receipt this Period

260.00

P/R Deduction (\$20.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

5259.90

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. CHARLES L WILKINS

Mailing Address 10827 MOUNT CURVE ROAD

City State Zip Code
 EDEN PRAIRIE MN 55347

FEC ID number of contributing
federal political committee.

C

Name of Employer
 United HealthCare Services Inc

Occupation
 CEO OH Financial Services

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 12 31 2011

Transaction ID : PR2445016626946

Amount of Each Receipt this Period

1300.00

P/R Deduction (\$100.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. LILLI ANN HIRSH

Mailing Address 7379 DEVIN LANE

City State Zip Code
 SHAKOPEE MN 55379

FEC ID number of contributing
federal political committee.

C

Name of Employer
 United HealthCare Services Inc

Occupation
 Dir Business Analysis

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

308.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 12 31 2011

Transaction ID : PR2445016726946

Amount of Each Receipt this Period

178.00

P/R Deduction (\$14.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. LENYS M ALCOREZA

Mailing Address 60 HIGHLAND AVENUE

City State Zip Code
 TONKA BAY MN 55331

FEC ID number of contributing
federal political committee.

C

Name of Employer
 United HealthCare Services Inc

Occupation
 VP Sales & Mktg C&S

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 12 31 2011

Transaction ID : PR2445016826946

Amount of Each Receipt this Period

130.00

P/R Deduction (\$10.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1608.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. MARK J DUHAIME

Mailing Address 5781 RUBY DRIVE

City
TROY

State Zip Code
MI 48085

FEC ID number of contributing
federal political committee.

C

Name of Employer

United HealthCare Services Inc

Occupation

VP Information Technology

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

666.00

Date of Receipt

12 / 31 / 2011

Transaction ID : PR2445016926946

Amount of Each Receipt this Period

507.00

P/R Deduction (\$39.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. SABRINA FERGUSON

Mailing Address 507 NORTHWIND DRIVE

City
BRANDON

State Zip Code
MS 39047

FEC ID number of contributing
federal political committee.

C

Name of Employer

United HealthCare Services Inc

Occupation

Assoc Dir Clinical Quality

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

520.00

Date of Receipt

12 / 31 / 2011

Transaction ID : PR2445017226946

Amount of Each Receipt this Period

260.00

P/R Deduction (\$20.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. EILEEN J LIVERANI

Mailing Address 100 BOSTOCK ROAD

City
SHOKAN

State Zip Code
NY 12481

FEC ID number of contributing
federal political committee.

C

Name of Employer

United HealthCare Services Inc

Occupation

Dir Customer Service

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

720.20

Date of Receipt

12 / 31 / 2011

Transaction ID : PR2460167226946

Amount of Each Receipt this Period

360.10

P/R Deduction (\$27.70 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

1127.10

TOTAL This Period (last page this line number only)..... ►

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. DANIEL KRAJNOVICH

Mailing Address 9958 BUTTOWNDOWN LANE

City State Zip Code
 ZIONSVILLE IN 46077

FEC ID number of contributing
federal political committee.

C

Name of Employer
 United HealthCare Services Inc

Occupation
 Health Plan CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 12 31 2011

Transaction ID : PR2460167326946

Amount of Each Receipt this Period

170.00

P/R Deduction (\$20.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. LUKE J MALLOY

Mailing Address 4635 URBANDALE COURT NORTH

City State Zip Code
 PLYMOUTH MN 55446

FEC ID number of contributing
federal political committee.

C

Name of Employer
 United HealthCare Services Inc

Occupation
 Dir Compensation - Bus Group

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 12 31 2011

Transaction ID : PR2460167426946

Amount of Each Receipt this Period

130.00

P/R Deduction (\$10.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. JUNE THIELEN

Mailing Address 6245 WAKEFIELD COURT

City State Zip Code
 SHAKOPEE MN 55379

FEC ID number of contributing
federal political committee.

C

Name of Employer
 United HealthCare Services Inc

Occupation
 SVP Human Capital

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

358.80

Date of Receipt

M M / D D / Y Y Y Y Y Y
 12 31 2011

Transaction ID : PR2460167526946

Amount of Each Receipt this Period

179.40

P/R Deduction (\$13.80 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

479.40

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. KARIN KEITEL

Mailing Address 3918 HAVEN ROAD

City State Zip Code
 MINNETONKA MN 55345

FEC ID number of contributing federal political committee.

C

Name of Employer

United HealthCare Services Inc

Occupation

Business Segment Gen Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 12 31 2011

Transaction ID : PR2460167626946

Amount of Each Receipt this Period

650.00

P/R Deduction (\$50.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. RACHEL V GODWIN

Mailing Address 343 TARAS DR

City State Zip Code
 HIGHLAND MI 48356

FEC ID number of contributing federal political committee.

C

Name of Employer

United HealthCare Services Inc

Occupation

Dir Medical & Clinical Ops

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

295.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 12 31 2011

Transaction ID : PR2460167826946

Amount of Each Receipt this Period

230.00

P/R Deduction (\$20.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. SHELBY P SOLOMON

Mailing Address 5702 BLAKE ROAD

City State Zip Code
 EDINA MN 55436

FEC ID number of contributing federal political committee.

C

Name of Employer

United HealthCare Services Inc

Occupation

President Government

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2990.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 12 31 2011

Transaction ID : PR2460167926946

Amount of Each Receipt this Period

1495.00

P/R Deduction (\$115.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

2375.00

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. JELKA S PETROVIC

Mailing Address 4454 PEPPER MILL LANE

City State Zip Code
 ORION MI 48359

FEC ID number of contributing federal political committee.

C

Name of Employer

United HealthCare Services Inc

Occupation

Health Plan CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

520.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 12 31 2011

Transaction ID : PR2460168026946

Amount of Each Receipt this Period

260.00

P/R Deduction (\$20.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. LARRY C RENFRO

Mailing Address 5 DOVE LANE

City State Zip Code
 ANDOVER MA 01810

FEC ID number of contributing federal political committee.

C

Name of Employer

United HealthCare Services Inc

Occupation

EVP UHG and CEO Optum

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4999.80

Date of Receipt

M M / D D / Y Y Y Y Y Y
 12 31 2011

Transaction ID : PR2460168126946

Amount of Each Receipt this Period

2499.90

P/R Deduction (\$192.30 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. DAVID B ORBUCH

Mailing Address 3370 SYCAMORE LANE

City State Zip Code
 PLYMOUTH MN 55441

FEC ID number of contributing federal political committee.

C

Name of Employer

United HealthCare Services Inc

Occupation

Chief Compliance Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1001.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 12 31 2011

Transaction ID : PR2460168226946

Amount of Each Receipt this Period

500.50

P/R Deduction (\$38.50 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

3260.40

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. ERIC J WEXLER

Mailing Address 7220 WILLOW OAK DR

City State Zip Code
WEST BLOOMFIELD MI 48324

FEC ID number of contributing
federal political committee.

C

Name of Employer
United HealthCare Services Inc

Occupation
Deputy General Counsel (Mgr)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

832.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 31 2011

Transaction ID : PR2463723126946

Amount of Each Receipt this Period

416.00

P/R Deduction (\$32.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. KAREN L WALKOWSKI

Mailing Address 6359 COUNTRY ROAD

City State Zip Code
EDEN PRAIRIE MN 55346

FEC ID number of contributing
federal political committee.

C

Name of Employer
United HealthCare Services Inc

Occupation
Assoc Dir Provider Svc

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

520.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 31 2011

Transaction ID : PR2463723426946

Amount of Each Receipt this Period

260.00

P/R Deduction (\$20.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. PETER M GILL

Mailing Address 8380 MONTGOMERY COURT

City State Zip Code
EDEN PRAIRIE MN 55347

FEC ID number of contributing
federal political committee.

C

Name of Employer
United HealthCare Services Inc

Occupation
VP Corporate Development

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 31 2011

Transaction ID : PR2463724626946

Amount of Each Receipt this Period

2500.00

P/R Deduction (\$2500.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

3176.00

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. SUE SCHICK

Mailing Address 319 BERKLEY ROAD

City State Zip Code
 MERION STATION PA 19066

FEC ID number of contributing
federal political committee.

C

Name of Employer
 United HealthCare Services Inc

Occupation
 Health Plan CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 12 31 2011

Transaction ID : PR2480620526946

Amount of Each Receipt this Period

1625.00

P/R Deduction (\$125.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. CHRISTOPHER MARK ABBOTT

Mailing Address W154N6076 HICKORY HOLLOW CT

City State Zip Code
 MENOMONEE FALLS WI 53051

FEC ID number of contributing
federal political committee.

C

Name of Employer
 United HealthCare Services Inc

Occupation
 Executive Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

264.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 12 31 2011

Transaction ID : PR2484541526946

Amount of Each Receipt this Period

134.00

P/R Deduction (\$14.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. JO ANNE M ANDERSON

Mailing Address 6236 KNOLL DRIVE

City State Zip Code
 EDINA MN 55436

FEC ID number of contributing
federal political committee.

C

Name of Employer
 United HealthCare Services Inc

Occupation
 VP Integration

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2002.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 12 31 2011

Transaction ID : PR2484541626946

Amount of Each Receipt this Period

1079.00

P/R Deduction (\$97.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

2838.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. MATTHEW A BURNS

Mailing Address 416 EAST 4TH STREET

City
EDMOND

State Zip Code
OK 73034

FEC ID number of contributing
federal political committee.

C

Name of Employer
United HealthCare Services Inc

Occupation
Dir Communications

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 31 2011

Transaction ID : PR2484541726946

Amount of Each Receipt this Period

650.00

P/R Deduction (\$50.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. JAMES F COPPENS

Mailing Address 5965 LAKE LINDEN COURT

City
SHOREWOOD

State Zip Code
MN 55331

FEC ID number of contributing
federal political committee.

C

Name of Employer
United HealthCare Services Inc

Occupation
SVP Total Compensation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1641.90

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 31 2011

Transaction ID : PR2484541926946

Amount of Each Receipt this Period

820.95

P/R Deduction (\$63.15 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. LILLIAN R HECKMAN

Mailing Address 552 DEER LAKE CIRCLE

City
BLUE BELL

State Zip Code
PA 19422

FEC ID number of contributing
federal political committee.

C

Name of Employer
United HealthCare Services Inc

Occupation
Six Sigma Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

780.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 31 2011

Transaction ID : PR2484542126946

Amount of Each Receipt this Period

390.00

P/R Deduction (\$30.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1860.95

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. KEVIN KNARR

Mailing Address 3138 O STREET NW

City
WASHINGTON

State Zip Code
DC 20007

FEC ID number of contributing
federal political committee.

C

Name of Employer
United HealthCare Services Inc

Occupation
VP Operations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

999.96

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 31 2011

Transaction ID : PR2484542326946

Amount of Each Receipt this Period

499.98

P/R Deduction (\$38.46 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. MARK A PHILLIPS

Mailing Address 1760 LUCY RIDGE CT

City
CHANHASSEN

State Zip Code
MN 55317

FEC ID number of contributing
federal political committee.

C

Name of Employer
United HealthCare Services Inc

Occupation
SVP Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

429.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 31 2011

Transaction ID : PR2484542626946

Amount of Each Receipt this Period

429.00

P/R Deduction (\$39.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. DANIEL R TROPEANO

Mailing Address 270 RAVENSCLIFF RD

City
SAINT DAVIDS

State Zip Code
PA 19087

FEC ID number of contributing
federal political committee.

C

Name of Employer
United HealthCare Services Inc

Occupation
SB & KA VP Sales & Acct Mgt

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 31 2011

Transaction ID : PR2484542826946

Amount of Each Receipt this Period

130.00

P/R Deduction (\$10.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1058.98

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. JERI G KUBICKI

Mailing Address 6869 KEENELAND WAY

City State Zip Code
MASON OH 45040

FEC ID number of contributing
federal political committee.

C

Name of Employer
United HealthCare Services Inc

Occupation
VP Govt Rel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 31 2011

Transaction ID : PR2486697826946

Amount of Each Receipt this Period

650.00

P/R Deduction (\$50.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. THOMAS B MANDERFELD

Mailing Address 4835 PENN AVENUE SOUTH

City State Zip Code
MINNEAPOLIS MN 55419

FEC ID number of contributing
federal political committee.

C

Name of Employer
United HealthCare Services Inc

Occupation
VP General Management

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1040.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 31 2011

Transaction ID : PR2486697926946

Amount of Each Receipt this Period

520.00

P/R Deduction (\$40.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. LEANNE E SCHEIBER

Mailing Address 1008 LEXINGTON AVE N

City State Zip Code
NEW PRAGUE MN 56071

FEC ID number of contributing
federal political committee.

C

Name of Employer
United HealthCare Services Inc

Occupation
Dir Underwriting

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 31 2011

Transaction ID : PR2486698126946

Amount of Each Receipt this Period

130.00

P/R Deduction (\$10.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1300.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. DIRK C MCMAHON

Mailing Address 1608 SUMMIT OAKS CT

City
BURNSVILLE

State Zip Code
MN 55337

FEC ID number of contributing
federal political committee.

C

Name of Employer

United HealthCare Services Inc

Occupation

Business Segment CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 31 2011

Transaction ID : PR2491457026946

Amount of Each Receipt this Period

1300.00

P/R Deduction (\$100.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. JOHN G NACKEL

Mailing Address 666 LINDA VISTA AVENUE

City
PASADENA

State Zip Code
CA 91105

FEC ID number of contributing
federal political committee.

C

Name of Employer

United HealthCare Services Inc

Occupation

SVP OptumInsight Consulting

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2522.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 31 2011

Transaction ID : PR2491457226946

Amount of Each Receipt this Period

1261.00

P/R Deduction (\$97.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. CHRISTOPHER S STANLEY

Mailing Address 12934 W 81ST AVE

City
ARVADA

State Zip Code
CO 80005

FEC ID number of contributing
federal political committee.

C

Name of Employer

United HealthCare Services Inc

Occupation

Sr Medical Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 31 2011

Transaction ID : PR2491457426946

Amount of Each Receipt this Period

650.00

P/R Deduction (\$50.00 Bi-Weekly)

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3211.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. KATHRYN M SULLIVAN

Mailing Address 530 N LAKE SHORE DR # 2309

City State Zip Code
 CHICAGO IL 60611

FEC ID number of contributing
federal political committee.

C

Name of Employer
 United HealthCare Services Inc

Occupation
 Region CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2522.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 12 31 2011

Transaction ID : PR2491457526946

Amount of Each Receipt this Period

1261.00

P/R Deduction (\$97.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. MICHAEL SCOTT HARTLEY

Mailing Address 4313 MORNINGSIDE ROAD

City State Zip Code
 EDINA MN 55416

FEC ID number of contributing
federal political committee.

C

Name of Employer
 United HealthCare Services Inc

Occupation
 VP Operations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 12 31 2011

Transaction ID : PR2538641326946

Amount of Each Receipt this Period

500.00

P/R Deduction (\$500.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. MARTIN C TOOMB

Mailing Address 4 STANLEY TERRACE

City State Zip Code
 DOVER NJ 07801

FEC ID number of contributing
federal political committee.

C

Name of Employer
 United HealthCare Services Inc

Occupation
 VP IT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 12 31 2011

Transaction ID : PR2538641526946

Amount of Each Receipt this Period

195.00

P/R Deduction (\$15.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1956.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. KARA V SMITH

Mailing Address 3 14 STREET NORTH EAST

City State Zip Code
 WASHINGTON DC 20002

FEC ID number of contributing federal political committee.

C

Name of Employer

United HealthCare Services Inc

Occupation

Dir Govt Rel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 12 31 2011

Transaction ID : PR2540175326946

Amount of Each Receipt this Period

2363.62

P/R Deduction (\$153.85 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. PATRICK J BRENNAN

Mailing Address 141 - 92ND STREET

City State Zip Code
 BROOKLYN NY 11209

FEC ID number of contributing federal political committee.

C

Name of Employer

United HealthCare Services Inc

Occupation

Dir Govt Rel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 12 31 2011

Transaction ID : PR2541300226946

Amount of Each Receipt this Period

130.00

P/R Deduction (\$10.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. EDWARD M CHESTON

Mailing Address 61 SPA ROAD

City State Zip Code
 ANNAPOLIS MD 21401

FEC ID number of contributing federal political committee.

C

Name of Employer

United HealthCare Services Inc

Occupation

Dir Govt Rel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

580.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 12 31 2011

Transaction ID : PR2541300326946

Amount of Each Receipt this Period

360.00

P/R Deduction (\$30.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

2853.62

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. HYLLIUS R EDWARDS

Mailing Address PO BOX 44246

City
DENVER

State Zip Code
CO 80201

FEC ID number of contributing
federal political committee.

C

Name of Employer
United HealthCare Services Inc

Occupation
Dir Govt Rel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1050.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 31 2011

Transaction ID : PR2541300426946

Amount of Each Receipt this Period

650.00

P/R Deduction (\$50.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. MATTHEW A KING

Mailing Address 1112 LORME COURT

City
BRENTWOOD

State Zip Code
TN 37027

FEC ID number of contributing
federal political committee.

C

Name of Employer
United HealthCare Services Inc

Occupation
Dir Govt Rel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1050.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 31 2011

Transaction ID : PR2541300526946

Amount of Each Receipt this Period

650.00

P/R Deduction (\$50.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. JOHN VERSAGGI

Mailing Address 800 ALBANY AVENUE

City
ALEXANDRIA

State Zip Code
VA 22302

FEC ID number of contributing
federal political committee.

C

Name of Employer
United HealthCare Services Inc

Occupation
Dir Govt Rel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.05

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 31 2011

Transaction ID : PR2541300826946

Amount of Each Receipt this Period

1547.65

P/R Deduction (\$96.16 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

2847.65

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. JOHN F DOHERTY

Mailing Address 5338 SPILMAN AVENUE

City

SACRAMENTO

State

CA

Zip Code

95819

FEC ID number of contributing
federal political committee.

C

Name of Employer

United HealthCare Services Inc

Occupation

Dir Govt Rel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 31 / 2011

Transaction ID : PR2542024526946

Amount of Each Receipt this Period

650.00

P/R Deduction (\$50.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. MATTHEW D ONSTOTT

Mailing Address 2324 LA SENDA STREET

City

SANTA FE

State

NM

Zip Code

87505

FEC ID number of contributing
federal political committee.

C

Name of Employer

United HealthCare Services Inc

Occupation

Dir Govt Rel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 31 / 2011

Transaction ID : PR2542024626946

Amount of Each Receipt this Period

260.00

P/R Deduction (\$20.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. BRENDAN HOSTETLER

Mailing Address 3643 N SEELEY AVENUE
#2

City

CHICAGO

State

IL

Zip Code

60618

FEC ID number of contributing
federal political committee.

C

Name of Employer

United HealthCare Services Inc

Occupation

Govt Rel Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

570.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 31 / 2011

Transaction ID : PR2542541926946

Amount of Each Receipt this Period

390.00

P/R Deduction (\$30.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1300.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. JENNIFER L MCMULLEN

Mailing Address 857 GLENBROOK DRIVE

City
ATLANTA

State Zip Code
GA 30318

FEC ID number of contributing
federal political committee.

C

Name of Employer
United HealthCare Services Inc

Occupation
Govt Rel Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

475.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 31 2011

Transaction ID : PR2542542126946

Amount of Each Receipt this Period

325.00

P/R Deduction (\$25.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. RICHARD E RAMSAY

Mailing Address 543 E LURAY AVE

City
ALEXANDRIA

State Zip Code
VA 22301

FEC ID number of contributing
federal political committee.

C

Name of Employer
United HealthCare Services Inc

Occupation
Govt Rel Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

950.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 31 2011

Transaction ID : PR2542542226946

Amount of Each Receipt this Period

650.00

P/R Deduction (\$50.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. IPYANA SPENCER

Mailing Address 4226 40TH STREET NORTH

City
ARLINGTON

State Zip Code
VA 22207

FEC ID number of contributing
federal political committee.

C

Name of Employer
United HealthCare Services Inc

Occupation
Govt Rel Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

570.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 31 2011

Transaction ID : PR2542542326946

Amount of Each Receipt this Period

390.00

P/R Deduction (\$30.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1365.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. ANNE YAU

Mailing Address 9905 WOODLAND DRIVE

City State Zip Code
SILVER SPRING MD 20902

FEC ID number of contributing
federal political committee.

C

Name of Employer
United HealthCare Services Inc

Occupation
Govt Rel Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 31 2011

Transaction ID : PR2543582526946

Amount of Each Receipt this Period

195.00

P/R Deduction (\$15.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. CHANTA G COMBS

Mailing Address 4229 SUMMERTREE DRIVE

City State Zip Code
TALLAHASSEE FL 32311

FEC ID number of contributing
federal political committee.

C

Name of Employer
United HealthCare Services Inc

Occupation
Govt Rel Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

615.36

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 31 2011

Transaction ID : PR2552313526946

Amount of Each Receipt this Period

499.98

P/R Deduction (\$38.46 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. JEFFREY D ALTER

Mailing Address 3 WOODLAND ROAD

City State Zip Code
BELLE TERRE NY 11777

FEC ID number of contributing
federal political committee.

C

Name of Employer
United HealthCare Services Inc

Occupation
Business Segment CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3721.85

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 31 2011

Transaction ID : PR2552960226946

Amount of Each Receipt this Period

3529.58

P/R Deduction (\$14.79 Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

4224.56

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. JEREMY VAUGHN BRYANT

Mailing Address 11700 ARBORHILL DRIVE

City State Zip Code
 ZIONSVILLE IN 46077

FEC ID number of contributing
federal political committee.

C

Name of Employer

United HealthCare Services Inc

Occupation

KA Dir Acct Mgmt

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

490.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 12 31 2011

Transaction ID : PR2552961326946

Amount of Each Receipt this Period

455.00

P/R Deduction (\$35.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. SCOTT F FLANNERY

Mailing Address 8508 TRELADY CT

City State Zip Code
 PLANO TX 75024

FEC ID number of contributing
federal political committee.

C

Name of Employer

United HealthCare Services Inc

Occupation

Health Plan CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

546.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 12 31 2011

Transaction ID : PR2552962326946

Amount of Each Receipt this Period

507.00

P/R Deduction (\$39.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. CLAIRE L HANNAN

Mailing Address 25932 PORTAFINO DRIVE

City State Zip Code
 MISSION VIEJO CA 92691

FEC ID number of contributing
federal political committee.

C

Name of Employer

United HealthCare Services Inc

Occupation

VP General Management

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

546.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 12 31 2011

Transaction ID : PR2552962726946

Amount of Each Receipt this Period

507.00

P/R Deduction (\$39.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1469.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. GREGORY J JAMES

Mailing Address 2323 KINGS POINT DRIVE

City State Zip Code
 LARGO FL 33774

FEC ID number of contributing federal political committee.

C

Name of Employer

United HealthCare Services Inc

Occupation

Medical Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

546.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 12 31 2011

Transaction ID : PR2552963226946

Amount of Each Receipt this Period

507.00

P/R Deduction (\$39.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. JARRETT T JEDLICKA

Mailing Address 13852 BIRCHWOOD AVE

City State Zip Code
 ROSEMOUNT MN 55068

FEC ID number of contributing federal political committee.

C

Name of Employer

United HealthCare Services Inc

Occupation

Dir Traffic/Workforce

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

560.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 12 31 2011

Transaction ID : PR2552963326946

Amount of Each Receipt this Period

520.00

P/R Deduction (\$40.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. BENJAMIN T KEHL

Mailing Address 19619 CALUMET COURT

City State Zip Code
 FARMINGTON MN 55024

FEC ID number of contributing federal political committee.

C

Name of Employer

United HealthCare Services Inc

Occupation

Dir Product

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

560.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 12 31 2011

Transaction ID : PR2552963526946

Amount of Each Receipt this Period

520.00

P/R Deduction (\$40.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

1547.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. NARASIMHAN KIDAMBI

Mailing Address 18477 85TH AVE N

City State Zip Code
 MAPLE GROVE MN 55311

FEC ID number of contributing federal political committee.

C

Name of Employer

United HealthCare Services Inc

Occupation

Assoc Dir Business Analysis

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 12 31 2011

Transaction ID : PR2552963826946

Amount of Each Receipt this Period

260.00

P/R Deduction (\$20.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. THOMAS D SCIUTO

Mailing Address 160 ACORN LANE

City State Zip Code
 MILFORD CT 06461

FEC ID number of contributing federal political committee.

C

Name of Employer

United HealthCare Services Inc

Occupation

KA Dir Acct Mgmt

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

546.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 12 31 2011

Transaction ID : PR2552966126946

Amount of Each Receipt this Period

507.00

P/R Deduction (\$39.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. WILLIAM OWEN WILLIAMS II

Mailing Address 12419 BELLINGRATH STREET

City State Zip Code
 CARMEL IN 46032

FEC ID number of contributing federal political committee.

C

Name of Employer

Golden Rule Insurance Company

Occupation

Associate General Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

560.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 12 31 2011

Transaction ID : PR2552967126946

Amount of Each Receipt this Period

520.00

P/R Deduction (\$40.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

1287.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
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(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. MATTHEW L NOLTE

Mailing Address 6308 LAKEWOOD HOLLOW

City	State	Zip Code
AUSTIN	TX	78750

FEC ID number of contributing
federal political committee.

C

Name of Employer

United HealthCare Services Inc

Occupation

KA Dir Acct Mgmt

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

365.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	31	/	2011

Transaction ID : PR2553474826946

Amount of Each Receipt this Period

365.00

P/R Deduction (\$365.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. MONICA L RAYBURN

Mailing Address 688 WEST SYCAMORE

City	State	Zip Code
VERNON HILLS	IL	60061

FEC ID number of contributing
federal political committee.

C

Name of Employer

United HealthCare Services Inc

Occupation

Dir Claims

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

507.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	31	/	2011

Transaction ID : PR2553475126946

Amount of Each Receipt this Period

507.00

P/R Deduction (\$39.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. RICHARD D THOMAS

Mailing Address 5121 DUPONT AVENUE SOUTH

City	State	Zip Code
MINNEAPOLIS	MN	55419

FEC ID number of contributing
federal political committee.

C

Name of Employer

United HealthCare Services Inc

Occupation

VP General Management

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

687.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	31	/	2011

Transaction ID : PR2553475426946

Amount of Each Receipt this Period

687.00

P/R Deduction (\$97.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

1559.00

TOTAL This Period (last page this line number only)..... ►

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. DENEEN VOJTA

Mailing Address 5201 KELLOGG AVENUE

City State Zip Code
 EDINA MN 55424

FEC ID number of contributing
federal political committee.

C

Name of Employer

United HealthCare Services Inc

Occupation

SVP Bus Initiatives & Clin Aff

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2509.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 12 31 2011

Transaction ID : PR2553475526946

Amount of Each Receipt this Period

2509.00

P/R Deduction (\$193.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. KARSTEN S FLAGSTAD

Mailing Address 13420 JAY ST NW

City State Zip Code
 ANDOVER MN 55304

FEC ID number of contributing
federal political committee.

C

Name of Employer

United HealthCare Services Inc

Occupation

VP IT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

468.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 12 31 2011

Transaction ID : PR2554013026946

Amount of Each Receipt this Period

468.00

P/R Deduction (\$39.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. DANIEL J CLUTE

Mailing Address 6017 N 68TH STREET

City State Zip Code
 OMAHA NE 68104

FEC ID number of contributing
federal political committee.

C

Name of Employer

United HealthCare Services Inc

Occupation

Medical Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1067.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 12 31 2011

Transaction ID : PR2560064426946

Amount of Each Receipt this Period

1067.00

P/R Deduction (\$97.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

4044.00

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. CRAIG W GAGE

Mailing Address 275 BAYSHORE BLVD #1007

City State Zip Code
TAMPA FL 33606

FEC ID number of contributing
federal political committee.

C

Name of Employer
United HealthCare Services Inc

Occupation
Medical Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

429.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 31 2011

Transaction ID : PR2560064726946

Amount of Each Receipt this Period

429.00

P/R Deduction (\$39.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. DONALD J GIANCURSIO

Mailing Address 72 MIDNIGHT RIDGE DR

City State Zip Code
LAS VEGAS NV 89135

FEC ID number of contributing
federal political committee.

C

Name of Employer
Health Plan of Nevada

Occupation
Health Plan CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2123.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 31 2011

Transaction ID : PR2560064926946

Amount of Each Receipt this Period

2123.00

P/R Deduction (\$193.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. JERI L JONES

Mailing Address 2150 SOUTH 55TH STREET
APT 2109

City State Zip Code
TEMPE AZ 85282

FEC ID number of contributing
federal political committee.

C

Name of Employer
United HealthCare Services Inc

Occupation
Health Plan CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

429.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 31 2011

Transaction ID : PR2560065126946

Amount of Each Receipt this Period

429.00

P/R Deduction (\$39.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

2981.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. BOOKER JOSEPH

Mailing Address 1041 EDGEWATER LANE

City State Zip Code
 CHELSEA AL 35043

FEC ID number of contributing
federal political committee.

C

Name of Employer

United HealthCare Services Inc

Occupation

M&R Regional Sales Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 12 31 2011

Transaction ID : PR2560065226946

Amount of Each Receipt this Period

400.00

P/R Deduction (\$100.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. SHELDON LIPPMAN

Mailing Address 55 CLIFFFIELD ROAD

City State Zip Code
 BEDFORD NY 10506

FEC ID number of contributing
federal political committee.

C

Name of Employer

United HealthCare Services Inc

Occupation

Medical Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1067.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 12 31 2011

Transaction ID : PR2560065426946

Amount of Each Receipt this Period

1067.00

P/R Deduction (\$97.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. ANGELA L LOBERG

Mailing Address 2837 EAST PARK PLACE

City State Zip Code
 MILWAUKEE WI 53211

FEC ID number of contributing
federal political committee.

C

Name of Employer

United HealthCare Services Inc

Occupation

SB VP Sales and Account Mgmt

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1067.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 12 31 2011

Transaction ID : PR2560065526946

Amount of Each Receipt this Period

1067.00

P/R Deduction (\$97.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

2534.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. JEFFREY D LUCHT

Mailing Address 191 MAIN ST

City

S GLASTONBURY

State

CT

Zip Code

06073

FEC ID number of contributing
federal political committee.

C

Name of Employer

United HealthCare Services Inc

Occupation

SVP Actuarial & Underwriting

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1067.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 31 / 2011

Transaction ID : PR2560065626946

Amount of Each Receipt this Period

1067.00

P/R Deduction (\$97.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. DAVID MILICH

Mailing Address 2702 BIRCHMERE COURT

City

KATY

State

TX

Zip Code

77450

FEC ID number of contributing
federal political committee.

C

Name of Employer

United HealthCare Services Inc

Occupation

Health Plan CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

429.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 31 / 2011

Transaction ID : PR2560066026946

Amount of Each Receipt this Period

429.00

P/R Deduction (\$39.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. ADINDU A UZOMA

Mailing Address 370 STEARNS ROAD

City

MARLBOROUGH

State

MA

Zip Code

01752

FEC ID number of contributing
federal political committee.

C

Name of Employer

United HealthCare Services Inc

Occupation

VP IT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 31 / 2011

Transaction ID : PR2560066726946

Amount of Each Receipt this Period

700.00

P/R Deduction (\$100.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

2196.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. ROBERT LASSITER

Mailing Address 848 N RAINBOW BLVD

City
LAS VEGAS

State Zip Code
NV 89107

FEC ID number of contributing
federal political committee.

C

Name of Employer
United HealthCare Services Inc

Occupation
Sr Sols Sls Exec OptumInsight

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

390.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 31 2011

Transaction ID : PR2560398626946

Amount of Each Receipt this Period

390.00

P/R Deduction (\$39.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. TIMOTHY J NOEL

Mailing Address 4408 THOMAS AVE SOUTH

City
MINNEAPOLIS

State Zip Code
MN 55410

FEC ID number of contributing
federal political committee.

C

Name of Employer
United HealthCare Services Inc

Occupation
VP Finance

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

390.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 31 2011

Transaction ID : PR2560398826946

Amount of Each Receipt this Period

390.00

P/R Deduction (\$39.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. JAMES CRONIN

Mailing Address 727 FALLSGROVED RD 5122

City
ROCKVILLE

State Zip Code
MD 20850

FEC ID number of contributing
federal political committee.

C

Name of Employer
United HealthCare Services Inc

Occupation
Health Plan CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

999.99

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 31 2011

Transaction ID : PR2560821126946

Amount of Each Receipt this Period

999.99

P/R Deduction (\$38.46 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1779.99

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. YBRAHIM GONZALEZ

Mailing Address 17401 SW 18 ST

City
MIRAMAR

State Zip Code
FL 33029

FEC ID number of contributing
federal political committee.

C

Name of Employer
United HealthCare Services Inc

Occupation
Dir Marketing

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 31 2011

Transaction ID : PR2563210926946

Amount of Each Receipt this Period

250.00

P/R Deduction (\$250.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. LARRY W CAVANAUGH

Mailing Address 520 NE 20TH ST # 1010

City
FORT LAUDERDALE

State Zip Code
FL 33305

FEC ID number of contributing
federal political committee.

C

Name of Employer
United HealthCare Services Inc

Occupation
Spec Ben Govt Dental Sales Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

273.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 31 2011

Transaction ID : PR2563211026946

Amount of Each Receipt this Period

273.00

P/R Deduction (\$39.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. KATHLEEN R CRAMPTON

Mailing Address 2335 SOUTH OCEAN BLVD B5

City
PALM BEACH

State Zip Code
FL 33480

FEC ID number of contributing
federal political committee.

C

Name of Employer
United HealthCare Services Inc

Occupation
Executive Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 31 2011

Transaction ID : PR2563211126946

Amount of Each Receipt this Period

700.00

P/R Deduction (\$100.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1223.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. JENNIFER F WALSH

Mailing Address 3116 4TH STREET NORTH

City State Zip Code
 ARLINGTON VA 22201

FEC ID number of contributing
federal political committee.

C

Name of Employer
 United HealthCare Services Inc

Occupation
 Dir Govt Rel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

582.00

Date of Receipt

12 / 31 / 2011

Transaction ID : PR2564296826946

Amount of Each Receipt this Period

582.00

P/R Deduction (\$97.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. ARTHUR R MILLER

Mailing Address 5009 ASHINGTON LANDING DRIVE

City State Zip Code
 TAMPA FL 33647

FEC ID number of contributing
federal political committee.

C

Name of Employer
 United HealthCare Services Inc

Occupation
 VP General Management

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.02

Date of Receipt

12 / 31 / 2011

Transaction ID : PR2564296926946

Amount of Each Receipt this Period

1000.02

P/R Deduction (\$166.67 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. JAMES E LIEDY

Mailing Address 12130 RED LEAF ROAD

City State Zip Code
 PARRISH FL 34219

FEC ID number of contributing
federal political committee.

C

Name of Employer
 United HealthCare Services Inc

Occupation
 M&R Sales Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

12 / 31 / 2011

Transaction ID : PR2564297026946

Amount of Each Receipt this Period

234.00

P/R Deduction (\$39.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1816.02

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. ANDREW C MACKENZIE

Mailing Address 1912 IRVING AVE S

City
MINNEAPOLIS

State Zip Code
MN 55403

FEC ID number of contributing
federal political committee.

C

Name of Employer
United HealthCare Services Inc

Occupation
VP Marketing

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 31 2011

Transaction ID : PR2564297126946

Amount of Each Receipt this Period

600.00

P/R Deduction (\$100.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. STEPHEN E SWANSON

Mailing Address 3001 HUNTINGTON COURT

City
KATY

State Zip Code
TX 77493

FEC ID number of contributing
federal political committee.

C

Name of Employer
United HealthCare Services Inc

Occupation
KA VP Account Management

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 31 2011

Transaction ID : PR2564297326946

Amount of Each Receipt this Period

234.00

P/R Deduction (\$39.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. HARVEY J BALTHASER

Mailing Address 11417 ARCHSTONE DR

City
AUSTIN

State Zip Code
TX 78739

FEC ID number of contributing
federal political committee.

C

Name of Employer
United HealthCare Services Inc

Occupation
Medical Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 31 2011

Transaction ID : PR2564297526946

Amount of Each Receipt this Period

234.00

P/R Deduction (\$39.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1068.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. PAUL DANIEL HANSEN

Mailing Address 18430 62ND PLACE NORTH

City	State	Zip Code
MAPLE GROVE	MN	55311

FEC ID number of contributing federal political committee.

C

Name of Employer

United HealthCare Services Inc

Occupation

Controller - Market Group

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

485.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
12		/	31		/	2011			

Transaction ID : PR2564802726946

Amount of Each Receipt this Period

485.00

P/R Deduction (\$97.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. PHYLLIS DOZIER

Mailing Address 4825 KNOX AVENUE SOUTH

City	State	Zip Code
MINNEAPOLIS	MN	55419

FEC ID number of contributing federal political committee.

C

Name of Employer

United HealthCare Services Inc

Occupation

VP Human Capital Dvlpmnt

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
12		/	31		/	2011			

Transaction ID : PR2564802826946

Amount of Each Receipt this Period

2500.00

P/R Deduction (\$2500.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. ELIZABETH D MORAN

Mailing Address 2231 BENT TREE LANE

City	State	Zip Code
MENDOTA HEIGHTS	MN	55120

FEC ID number of contributing federal political committee.

C

Name of Employer

United HealthCare Services Inc

Occupation

Chief Complnc/Ethics Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

485.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
12		/	31		/	2011			

Transaction ID : PR2564803126946

Amount of Each Receipt this Period

485.00

P/R Deduction (\$97.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

3470.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. DARREN C MOQUIST

Mailing Address 1200 NICOLLET MALL #507

City State Zip Code
 MINNEAPOLIS MN 55403

FEC ID number of contributing
federal political committee.

C

Name of Employer
 United HealthCare Services Inc

Occupation
 VP Finance

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

365.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 12 31 2011

Transaction ID : PR2564803426946

Amount of Each Receipt this Period

365.00

P/R Deduction (\$365.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. WILLIAM T MCENERY

Mailing Address 2012 HUMBOLDT AVENUE SOUTH

City State Zip Code
 MINNEAPOLIS MN 55405

FEC ID number of contributing
federal political committee.

C

Name of Employer
 United HealthCare Services Inc

Occupation
 Business Segment CMO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 12 31 2011

Transaction ID : PR2564803626946

Amount of Each Receipt this Period

500.00

P/R Deduction (\$100.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. TRACY CULVER

Mailing Address 913 NORTH ALBERT DRIVE

City State Zip Code
 CHANDLER AZ 85226

FEC ID number of contributing
federal political committee.

C

Name of Employer
 United HealthCare Services Inc

Occupation
 Sr Product Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

365.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 12 31 2011

Transaction ID : PR2564803826946

Amount of Each Receipt this Period

365.00

P/R Deduction (\$365.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1230.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. DEBRA J BERNS

Mailing Address 2553 WASHBURN AVENUE SOUTH

City State Zip Code
MINNEAPOLIS MN 55416

FEC ID number of contributing
federal political committee.

C

Name of Employer

United HealthCare Services Inc

Occupation

Sr Deputy General Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

485.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 31 2011

Transaction ID : PR2564804026946

Amount of Each Receipt this Period

485.00

P/R Deduction (\$97.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. SUSAN SOMMER

Mailing Address 130 SUNRISE AVENUE

City State Zip Code
EXCELSIOR MN 55331

FEC ID number of contributing
federal political committee.

C

Name of Employer

United HealthCare Services Inc

Occupation

VP Product

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

485.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 31 2011

Transaction ID : PR2564804226946

Amount of Each Receipt this Period

485.00

P/R Deduction (\$97.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. KATHRYN S RUBIN

Mailing Address 310 SYCAMORE LANE

City State Zip Code
PLYMOUTH MN 55441

FEC ID number of contributing
federal political committee.

C

Name of Employer

United HealthCare Services Inc

Occupation

VP Social Resp/Pres Foundation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

485.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 31 2011

Transaction ID : PR2564804326946

Amount of Each Receipt this Period

485.00

P/R Deduction (\$97.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1455.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. TIMOTHY A WICKS

Mailing Address PO BOX 44518

City State Zip Code
EDEN PRAIRIE MN 55344

FEC ID number of contributing
federal political committee.

C

Name of Employer
United HealthCare Services Inc

Occupation
SVP Operations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 31 2011

Transaction ID : PR2565448626946

Amount of Each Receipt this Period

500.00

P/R Deduction (\$500.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. CHRISTINE M ANDERSON

Mailing Address 4327 SNAIL LAKE BOULEVARD

City State Zip Code
SHOREVIEW MN 55126

FEC ID number of contributing
federal political committee.

C

Name of Employer
United HealthCare Services Inc

Occupation
SVP Human Capital Operations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 31 2011

Transaction ID : PR2565448926946

Amount of Each Receipt this Period

2500.00

P/R Deduction (\$2500.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

3000.00

280434.05

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☒ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. Ryan For Congress

Mailing Address P. O. Box 1919

City

Janesville

State

WI

Zip Code

53547

FEC ID number of contributing
federal political committee.

C

C00330894

Name of Employer

Occupation

Receipt For: 2012



Primary



General



Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 20 / 2011

Transaction ID : 34324485

Amount of Each Receipt this Period

2500.00

Refund from Accidental Check Deposit

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:



Primary



General



Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:



Primary



General



Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

2500.00

2500.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. Walberg For Congress

Mailing Address PO Box 368

City	State	Zip Code
Falls Church	VA	22040

Purpose of Disbursement

011

Candidate Name

Rep. Tim WalbergCategory/
Type

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2012
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: MI District: 07

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
07		07		2011

Transaction ID : 33536336

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

B. Walden for Congress

Mailing Address PO Box 1091

City	State	Zip Code
Hood River	OR	97031

Purpose of Disbursement

011

Candidate Name

Greg WaldenCategory/
Type

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2012
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: OR District: 02

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
07		07		2011

Transaction ID : 33536342

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

C. John S FundMailing Address 700 12th Street, NW
Suite 700

City	State	Zip Code
Washington	DC	20005

Purpose of Disbursement

011

Candidate Name

Category/
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
07		07		2011

Transaction ID : 33536460

Amount of Each Disbursement this Period

2500.00

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

9500.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. Marsha Blackburn For Congress Inc.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
07		21		2011

Mailing Address PO Box 682185

City	State	Zip Code
Franklin	TN	37068

Transaction ID : 33590059

Purpose of Disbursement

011

Amount of Each Disbursement this Period

1000.00

Candidate Name

Rep. Marsha BlackburnCategory/
Type

Office Sought:



House

Disbursement For: 2012



Primary



General



Senate



Other (specify) ▼



President

State: TN

District: 07

Full Name (Last, First, Middle Initial)

B. Gardner For Congress 2012

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
07		21		2011

Mailing Address PO Box 2408

City	State	Zip Code
Loveland	CO	80539

Transaction ID : 33590063

Purpose of Disbursement

011

Amount of Each Disbursement this Period

1000.00

Candidate Name

Rep. Cory GardnerCategory/
Type

Office Sought:



House

Disbursement For: 2012



Primary



General



Senate



Other (specify) ▼



President

State: CO

District: 04

Full Name (Last, First, Middle Initial)

C. Alamo PAC

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
07		21		2011

Mailing Address 919 Congress Ave
Suite 1400

City	State	Zip Code
Austin	TX	78701

Transaction ID : 33590064

Purpose of Disbursement

011

Amount of Each Disbursement this Period

2500.00

Candidate Name

Alamo PACCategory/
Type

Office Sought:



House

Disbursement For:



Primary



General



Senate



Other (specify) ▼



President

State:

District:

SUBTOTAL of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

4500.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. Republican Party of Wisconsin - FEDERAL ACCOUNT

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	01	/	2011

Mailing Address 148 E. Johnson Street

City	State	Zip Code
Madison	WI	53703

Transaction ID : 33620769

Purpose of Disbursement

011

Amount of Each Disbursement this Period

Candidate Name

Republican Party of Wisconsin - FEDERAL ACCOUNTCategory/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

3000.00

Full Name (Last, First, Middle Initial)

B. Making Business Excel Political Action Committee

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	03	/	2011

Mailing Address PO Box 3241

City	State	Zip Code
Cheyenne	WY	82001

Transaction ID : 33627729

Purpose of Disbursement

011

Amount of Each Disbursement this Period

Candidate Name

Making Business Excel Political Action CommitteeCategory/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

2500.00

Full Name (Last, First, Middle Initial)

C. Jim Gerlach For Congress Committee

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	16	/	2011

Mailing Address PO Box 87

City	State	Zip Code
Uwchland	PA	19480

Transaction ID : 33663238

Purpose of Disbursement

011

Amount of Each Disbursement this Period

Candidate Name

Rep. James W. GerlachCategory/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2012

☒ Primary ☐ General
☐ Other (specify) ▼

State: PA

District: 06

1500.00

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

7000.00

	21b		22	X	23		24		25		26
	27		28a		28b		28c		29		30b

UnitedHealth Group Incorporated PAC (United for Health)

A. TRUST PAC

Date of Disbursement

Transaction ID : 33663239

011

Amount of Each Disbursement this Period

Category/
Type

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

B. Hatch Election Committee

Date of Disbursement

09 / 14 / 2011

Transaction ID : 33758546

Amount of Each Disbursement this Period

011

Candidate Name

Category/
Type

Orrin G. Hatch

Disbursement For: 2012

☒ Primary ☐ General

☐ Other (specify) ▼

State: UT District:

Full Name (Last, First, Middle Initial)

C. Hatch Election Committee

Date of Disbursement

Transaction ID : 33758547

Amount of Each Disbursement this Period

011

Candidate Name

Category/
Type

Orrin G. Hatch

Disbursement For: 2012

☐ Primary ☒ General

☐ Other (specify) ▼

State: UT District:

SUBTOTAL of Disbursements This Page (optional).....

9000.00

TOTAL This Period (last page this line number only).....

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. Bob Casey For Senate Inc

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	14	/	2011

Mailing Address 607 14th Street Nw Suite 800

City	State	Zip Code
Washington	DC	20005

Purpose of Disbursement

011

Transaction ID : 33758807

Amount of Each Disbursement this Period

2500.00

Candidate Name

Sen. Robert Casey Jr.Category/
Type

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2012

☒ Primary ☐ General
☐ Other (specify) ▼

State: PA

District:

Full Name (Last, First, Middle Initial)

B. Manchin For West Virginia

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	14	/	2011

Mailing Address PO Box 5202

City	State	Zip Code
Charleston	WV	25361

Purpose of Disbursement

011

Transaction ID : 33758813

Amount of Each Disbursement this Period

2500.00

Candidate Name

Mr. Joe ManchinCategory/
Type

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2012

☒ Primary ☐ General
☐ Other (specify) ▼

State: WV

District:

Full Name (Last, First, Middle Initial)

C. Hatch Election Committee

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	15	/	2011

Mailing Address 555 13th Street NW
Suite 600 East

City	State	Zip Code
Washington	DC	20004-1109

Purpose of Disbursement

011

Transaction ID : 33769964

Amount of Each Disbursement this Period

1000.00

Candidate Name

Orrin G. HatchCategory/
Type

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2012

☐ Primary ☐ General
☒ Other (specify) ▼

State: UT

District:

Utah State Conventio

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

6000.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. Friends Of Congressman Tim Holden

Mailing Address 303 Massachusetts Avenue, NE

City	State	Zip Code
Washington	DC	20002

Purpose of Disbursement

011

Candidate Name

Rep. Tim Holden

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2012

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State: PA District: 17

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		19		2011

Transaction ID : 33779581

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

B. Kurt Schrader For Congress

Mailing Address PO Box 636

City	State	Zip Code
Annandale	VA	22003

Purpose of Disbursement

011

Candidate Name

Rep. Kurt Schrader

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2012

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State: OR District: 05

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		19		2011

Transaction ID : 33779767

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Chris Gibson For Congress

Mailing Address PO Box 247

City	State	Zip Code
Kinderhook	NY	12106

Purpose of Disbursement

011

Candidate Name

Rep. Chris Gibson

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2012

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State: NY District: 20

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		28		2011

Transaction ID : 33822900

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

4500.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
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(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. Bass Victory Committee

Mailing Address PO Box 3451

City	State	Zip Code
Concord	NH	03302

Purpose of Disbursement

011

Candidate Name

Charles BassCategory/
Type

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2012

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State: NH District: 02

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		28		2011

Transaction ID : 33822971

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Friends Of Dick Lugar

Mailing Address 406 Virginia Avenue

City	State	Zip Code
Alexandria	VA	22302

Purpose of Disbursement

011

Candidate Name

Sen. Richard LugarCategory/
Type

Office Sought:	<input type="checkbox"/> House
	<input checked="" type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2012

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State: IN District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		28		2011

Transaction ID : 33823017

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Glacier PACMailing Address 818 Connecticut Ave. NW
Suite 1100

City	State	Zip Code
Washington	DC	20006

Purpose of Disbursement

011

Candidate Name

Glacier PACCategory/
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		28		2011

Transaction ID : 33823087

Amount of Each Disbursement this Period

5000.00

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

7000.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. Tim Johnson For South Dakota

Mailing Address PO Box 1536

City	State	Zip Code
Sioux Falls	SD	57101

Purpose of Disbursement

011

Candidate Name

Sen. Tim Johnson

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify) ▼

State: SD District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	28	/	2011

Transaction ID : 33823090

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. John Carney For Congress

Mailing Address PO Box 2162

City	State	Zip Code
Wilmington	DE	19899

Purpose of Disbursement

011

Candidate Name

Rep. John Carney Jr.

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2012

☒ Primary ☐ General
☐ Other (specify) ▼

State: DE District: 00

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	28	/	2011

Transaction ID : 33823105

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Moderate Democrats Political Action Committee

Mailing Address 426 C Street, N.E.

City	State	Zip Code
Washington	DC	20002

Purpose of Disbursement

011

Candidate Name

Moderate Democrats Political Action Committee

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	28	/	2011

Transaction ID : 33823107

Amount of Each Disbursement this Period

5000.00

SUBTOTAL of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

7000.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. Kind for Congress

Mailing Address P.O. Box 184

City	State	Zip Code
La Crosse	WI	54603

Purpose of Disbursement

011

Candidate Name

Rep Ron Kind

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2012

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State: WI District: 03

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		28		2011

Transaction ID : 33823202

Amount of Each Disbursement this Period

1500.00

Full Name (Last, First, Middle Initial)

B. Jim Costa For CongressMailing Address 2037 W Bullard Avenue
355

City	State	Zip Code
Fresno	CA	93711

Purpose of Disbursement

011

Candidate Name

Rep. James Costa

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2012

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State: CA District: 20

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		28		2011

Transaction ID : 33823205

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Stephen F. Lynch For Congress CommitteeMailing Address 236 Massachusetts Ave., NE
Suite 202

City	State	Zip Code
Washington	DC	20002

Purpose of Disbursement

011

Candidate Name

Rep. Stephen Lynch

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2012

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State: MA District: 09

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		28		2011

Transaction ID : 33823210

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

3500.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. Friends Of John Barrow

Mailing Address PO Box 8166

City	State	Zip Code
Savannah	GA	31412

Purpose of Disbursement

011

Candidate Name

Rep. John BarrowCategory/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2012

☒ Primary ☐ General
☐ Other (specify) ▼

State: GA District: 12

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		28		2011

Transaction ID : 33823218

Amount of Each Disbursement this Period

1500.00

Full Name (Last, First, Middle Initial)

B. Friends Of Jeanne ShaheenMailing Address 1010 Vermont Ave. NW
Suite 814

City	State	Zip Code
Washington	DC	20005

Purpose of Disbursement

011

Candidate Name

Sen. Jeanne ShaheenCategory/
Type

Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify) ▼

State: NH District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		28		2011

Transaction ID : 33823221

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Mark Pryor For US Senate

Mailing Address 420 C Street, NE

City	State	Zip Code
Washington	DC	20002

Purpose of Disbursement

011

Candidate Name

Sen. Mark L. PryorCategory/
Type

Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify) ▼

State: AR District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		28		2011

Transaction ID : 33823227

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

3500.00

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SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. Mike Thompson For Congress

Mailing Address 5429 Madison Avenue

City	State	Zip Code
Sacramento	CA	95841

Purpose of Disbursement

011

Candidate Name

Rep. Michael ThompsonCategory/
Type

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2012

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State: CA District: 01

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	28	/	2011

Transaction ID : 33823230

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

B. Citizens For Altmire

Mailing Address P.O. Box 1776

City	State	Zip Code
Freedom	PA	15042

Purpose of Disbursement

011

Candidate Name

Mr. Jason AltmireCategory/
Type

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2012

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State: PA District: 04

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	28	/	2011

Transaction ID : 33823232

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

C. Bass Victory Committee

Mailing Address PO Box 3451

City	State	Zip Code
Concord	NH	03302

Purpose of Disbursement

011

Candidate Name

Charles BassCategory/
Type

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2012

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State: NH District: 02

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	17	/	2011

Transaction ID : 33923816

Amount of Each Disbursement this Period

1500.00

SUBTOTAL of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

6500.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. Snowe For Senate

Mailing Address PO Box 2012

City Portland	State ME	Zip Code 04104
------------------	-------------	-------------------

Purpose of Disbursement

011

Candidate Name

Sen. Olympia J. Snowe

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2012

☒ Primary ☐ General
☐ Other (specify) ▼

State: ME

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		17		2011

Transaction ID : 33923817

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

B. Ribble For Congress

Mailing Address PO Box 7200

City Appleton	State WI	Zip Code 54912
------------------	-------------	-------------------

Purpose of Disbursement

011

Candidate Name

Rep. Reid Ribble

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2012

☒ Primary ☐ General
☐ Other (specify) ▼

State: WI

District: 08

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		17		2011

Transaction ID : 33923818

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Strategy PAC

Mailing Address 1737 H St. NW

City Washington	State DC	Zip Code 20006
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Purpose of Disbursement

011

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		19		2011

Transaction ID : 33928135

Amount of Each Disbursement this Period

2500.00

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

6000.00

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SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. Hoyer For CongressMailing Address 607 14th Street, Nw
Suite 800

City Washington State DC Zip Code 20005

Purpose of Disbursement

011

Candidate Name

Rep. Steny H. HoyerOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: MD District: 05

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		19		2011

Transaction ID : 33928136

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

B. Kind for Congress

Mailing Address P.O. Box 184

City La Crosse State WI Zip Code 54603

Purpose of Disbursement

011

Candidate Name

Rep Ron KindOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: WI District: 03

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		19		2011

Transaction ID : 33928137

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Hagan For Us Senate Inc

Mailing Address PO Box 29103

City Greensboro State NC Zip Code 27429

Purpose of Disbursement

011

Candidate Name

Kay HaganOffice Sought: ☐ House
☒ Senate
☐ PresidentDisbursement For: 2014
☐ Primary ☒ General
☐ Other (specify) ▼

State: NC District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		19		2011

Transaction ID : 33928138

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

4500.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
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(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. Richard E Neal For Congress Committee

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		19		2011

Mailing Address 76 Magnolia Terrace

City	State	Zip Code
Springfield	MA	01108

Purpose of Disbursement

011

Transaction ID : 33928139

Amount of Each Disbursement this Period

1000.00

Candidate Name

Rep. Richard E. NealCategory/
Type

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2012

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State: MA District: 02

Full Name (Last, First, Middle Initial)

B. Ryan For Congress

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		26		2011

Mailing Address P. O. Box 1919

City	State	Zip Code
Janesville	WI	53547

Purpose of Disbursement
Contribution to Federal Candidate

011

Transaction ID : 33943936

Amount of Each Disbursement this Period

2500.00

Candidate Name

Rep. Paul D. RyanCategory/
Type

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2012

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State: WI District: 01

Full Name (Last, First, Middle Initial)

C. Tiberi For Congress

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		01		2011

Mailing Address 2931 E Dublin Granville Road
Suite 190

City	State	Zip Code
Columbus	OH	43231

Purpose of Disbursement
Contribution to Federal Candidate

011

Transaction ID : 33954833

Amount of Each Disbursement this Period

2500.00

Candidate Name

Rep. Patrick J. TiberiCategory/
Type

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2012

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State: OH District: 12

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

6000.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
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Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. Roskam for Congress Committee

Mailing Address 5006 Washington Ave.

City	State	Zip Code
Downers Grove	IL	60515

Purpose of Disbursement
Contribution to Federal Candidate

011

Candidate Name

Peter RoskamCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: IL District: 00

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	01	/	2011

Transaction ID : 33954834

Amount of Each Disbursement this Period

2500.00

Contribution to Federal Candidate

Full Name (Last, First, Middle Initial)

B. The Next Century Fund

Mailing Address 116 So. Royal Street

City	State	Zip Code
Alexandria	VA	22314

Purpose of Disbursement
Contribution to Federal PAC

011

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	01	/	2011

Transaction ID : 33954835

Amount of Each Disbursement this Period

1000.00

Contribution to Federal PAC

Full Name (Last, First, Middle Initial)

C. Bennet For Colorado

Mailing Address PO Box 3078

City	State	Zip Code
Denver	CO	80201

Purpose of Disbursement
Contribution to Federal Candidate

011

Candidate Name

Mr. Michael BennetCategory/
TypeOffice Sought: ☐ House
☒ Senate
☐ PresidentDisbursement For: 2011
☐ Primary ☐ General
☒ Other (specify) ▼

State: CO District: 2010 Debt Retirement

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	01	/	2011

Transaction ID : 33954837

Amount of Each Disbursement this Period

2500.00

Contribution to Federal Candidate

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

6000.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. Forward Together PACMailing Address 10 G Street, NE
Suite 570

City Washington State DC Zip Code 20002

Purpose of Disbursement
Contribution to Federal PAC

Candidate Name

Forward Together PACOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		01		2011

Transaction ID : 33954844

Amount of Each Disbursement this Period

5000.00

Contribution to Federal PAC

Full Name (Last, First, Middle Initial)

B. Upton For All Of Us

Mailing Address P.O. Box 490

City St. Joseph State MI Zip Code 49085

Purpose of Disbursement
Contribution to Federal Candidate

Candidate Name

Rep. Frederick UptonOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2012 ☒ Primary ☐ General
☐ Other (specify) ▼

State: MI District: 06

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		01		2011

Transaction ID : 33954845

Amount of Each Disbursement this Period

2500.00

Contribution to Federal Candidate

Full Name (Last, First, Middle Initial)

C. Pharmaceutical Care Management Association PACMailing Address 601 Pennsylvania Avenue, NW
7th Floor

City Washington State DC Zip Code 20004

Purpose of Disbursement
Contribution to Federal PAC

Candidate Name

Pharmaceutical Care Management Association PACOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		01		2011

Transaction ID : 33954847

Amount of Each Disbursement this Period

5000.00

Contribution to Federal PAC

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

12500.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. Democratic Party of Wisconsin - Federal Account

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		14		2011

Mailing Address 110 King Street, #203

City	State	Zip Code
Madison	WI	53703

Purpose of Disbursement
Contribution to National Party Committee

011

Candidate Name

Category/
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Transaction ID : 33994675

Amount of Each Disbursement this Period

3000.00

Contribution to National Party Committee

Full Name (Last, First, Middle Initial)

B. Republican Party of Wisconsin - FEDERAL ACCOUNT

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		14		2011

Mailing Address 148 E. Johnson Street

City	State	Zip Code
Madison	WI	53703

Purpose of Disbursement
Contribution to Federal PAC

011

Candidate Name

Category/
Type**Republican Party of Wisconsin - FEDERAL ACCOUNT**

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Transaction ID : 33994706

Amount of Each Disbursement this Period

2000.00

Contribution to Federal PAC

Full Name (Last, First, Middle Initial)

C. John D. Dingel for Congress Committee

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		18		2011

Mailing Address 9216 Pelham, Suite 101

City	State	Zip Code
Taylor	MI	48180

Purpose of Disbursement
Contribution to Federal Candidate

011

Candidate Name

Category/
Type**John D. Dingell**

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	2012
	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

State: MI District: 16

Transaction ID : 34022050

Amount of Each Disbursement this Period

1000.00

Contribution to Federal Candidate

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

6000.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. Friends Of John Boehner

Mailing Address 7908-I Cincinnati Dayton Road

City	State	Zip Code
West Chester	OH	45069

Purpose of Disbursement
Contribution to Federal Candidate

Candidate Name

John A. BoehnerOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: OH District: 08

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		18		2011

Transaction ID : 34022051

Amount of Each Disbursement this Period

5000.00

Contribution to Federal Candidate

Full Name (Last, First, Middle Initial)

B. Matheson For CongressMailing Address P O Box 521048
Suite A

City	State	Zip Code
Salt Lake City	UT	84152

Purpose of Disbursement
Contribution to Federal Candidate

Candidate Name

Rep. James D. MathesonOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2012
☐ Primary ☒ General
☐ Other (specify) ▼

State: UT District: 02

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		18		2011

Transaction ID : 34022052

Amount of Each Disbursement this Period

5000.00

Contribution to Federal Candidate

Full Name (Last, First, Middle Initial)

C. Bill Owens For Congress

Mailing Address PO Box 2020

City	State	Zip Code
Washington	DC	20013

Purpose of Disbursement
Contribution to Federal Candidate

Candidate Name

Rep. Bill OwensOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: NY District: 23

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		18		2011

Transaction ID : 34022053

Amount of Each Disbursement this Period

1000.00

Contribution to Federal Candidate

SUBTOTAL of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

11000.00

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SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. Heath Shuler for Congress

Mailing Address 38 Ivy Street, SE

City	State	Zip Code
Washington	DC	20004

Purpose of Disbursement
Contribution to Federal Candidate

Candidate Name

Heath Shuler for Congress

Office Sought:	Disbursement For: 2012
<input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

State: NC District: 11

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		18		2011

Transaction ID : 34022054

Amount of Each Disbursement this Period

2500.00

Contribution to Federal Candidate

Full Name (Last, First, Middle Initial)

B. Heath Shuler for Congress

Mailing Address 38 Ivy Street, SE

City	State	Zip Code
Washington	DC	20004

Purpose of Disbursement
Contribution to Federal Candidate

Candidate Name

Heath Shuler for Congress

Office Sought:	Disbursement For: 2012
<input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

State: NC District: 11

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		18		2011

Transaction ID : 34022055

Amount of Each Disbursement this Period

2500.00

Contribution to Federal Candidate

Full Name (Last, First, Middle Initial)

C. Yoder For Congress

Mailing Address PO Box 26742

City	State	Zip Code
Overland Park	KS	66225

Purpose of Disbursement
Contribution to Federal Candidate

Candidate Name

Mr. Kevin Yoder

Office Sought:	Disbursement For: 2012
<input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

State: KS District: 03

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		23		2011

Transaction ID : 34024922

Amount of Each Disbursement this Period

2500.00

Contribution to Federal Candidate

SUBTOTAL of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

7500.00

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	21b		22	X	23		24		25		26
	27		28a		28b		28c		29		30b

UnitedHealth Group Incorporated PAC (United for Health)

5000.00

Contribution to Federal Candidate

Three digital displays showing the date 11/23/2011 in MM/DD/YYYY format. The first display shows '11' with 'M' and 'M' above it. The second display shows '23' with 'D' and 'D' above it. The third display shows '2011' with 'Y', 'Y', 'Y', and 'Y' above it.

Contribution to Federal Candidate

1000.00

Contributions to Federal Candidates

7000.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. Guthrie For CongressMailing Address 499 South Capitol Street, SW
Suite 420

City Washington State DC Zip Code 20003

Purpose of Disbursement
Contributions to Federal Candidates

Candidate Name

Rep. S. GuthrieOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: KY District: 02

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
12		14		2011

Transaction ID : 34118980

Amount of Each Disbursement this Period

1000.00

Contributions to Federal Candidates

Full Name (Last, First, Middle Initial)

B. Gowdy For CongressMailing Address 499 South Capitol Street, SW
Suite 420

City Washington State DC Zip Code 20003

Purpose of Disbursement
Contributions to Federal Candidates

Candidate Name

Rep. Trey GowdyOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: SC District: 04

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
12		14		2011

Transaction ID : 34118981

Amount of Each Disbursement this Period

1000.00

Contributions to Federal Candidates

Full Name (Last, First, Middle Initial)

C. Walberg For Congress

Mailing Address PO Box 368

City Falls Church State VA Zip Code 22040

Purpose of Disbursement
Contributions to Federal Candidates

Candidate Name

Rep. Tim WalbergOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: MI District: 07

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
12		14		2011

Transaction ID : 34118982

Amount of Each Disbursement this Period

2500.00

Contributions to Federal Candidates

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

4500.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
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(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. Kline For CongressMailing Address 101 W Burnsville Pkwy Suite 104
Suite 104

City Burnsville State MN Zip Code 55337

Purpose of Disbursement
Void - Kline For Congress

Candidate Name

Mr. John KlineOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: MN District: 02

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
12		15		2011

Transaction ID : 34121104

Amount of Each Disbursement this Period

-5000.00

Void - Kline For Congress

Full Name (Last, First, Middle Initial)

B. Team EmersonMailing Address P.O. Box 822
400 Broadway, Suite 501

City Cape Girardeau State MO Zip Code 63702

Purpose of Disbursement
Void - Team Emerson

Candidate Name

Rep. Jo Ann EmersonOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: MO District: 08

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
12		15		2011

Transaction ID : 34121105

Amount of Each Disbursement this Period

-1000.00

Void - Team Emerson

Full Name (Last, First, Middle Initial)

C. Team EmersonMailing Address P.O. Box 822
400 Broadway, Suite 501

City Cape Girardeau State MO Zip Code 63702

Purpose of Disbursement
Contributions to Federal Candidates

Candidate Name

Rep. Jo Ann EmersonOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: MO District: 08

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
12		15		2011

Transaction ID : 34121106

Amount of Each Disbursement this Period

1000.00

Contributions to Federal Candidates

SUBTOTAL of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

-5000.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. Kline For CongressMailing Address 101 W Burnsville Pkwy Suite 104
Suite 104

City Burnsville State MN Zip Code 55337

Purpose of Disbursement
Contributions to Federal Candidates

Candidate Name

Mr. John KlineOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: MN District: 02

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
12		15		2011

Transaction ID : 34121109

Amount of Each Disbursement this Period

5000.00

Contributions to Federal Candidates

Full Name (Last, First, Middle Initial)

B. Bill Nelson For U S Senate

Mailing Address 500 Red Sail Way

City Satellite Beach State FL Zip Code 32937

Purpose of Disbursement
Contribution to Federal Candidate

Candidate Name

Mr. Bill NelsonOffice Sought: ☐ House
☒ Senate
☐ PresidentDisbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: FL District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
12		19		2011

Transaction ID : 34141780

Amount of Each Disbursement this Period

1000.00

Contribution to Federal Candidate

Full Name (Last, First, Middle Initial)

C. Bill Nelson For U S Senate

Mailing Address 500 Red Sail Way

City Satellite Beach State FL Zip Code 32937

Purpose of Disbursement
Contributions to Federal Candidates

Candidate Name

Mr. Bill NelsonOffice Sought: ☐ House
☒ Senate
☐ PresidentDisbursement For: 2012
☐ Primary ☒ General
☐ Other (specify) ▼

State: FL District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
12		19		2011

Transaction ID : 34142710

Amount of Each Disbursement this Period

1500.00

Contributions to Federal Candidates

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

7500.00

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SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. The Republican Majority Fund

Mailing Address PO BOX 144

City	State	Zip Code
ALEXANDRIA	VA	22313

Purpose of Disbursement
Contribution to Federal PAC

011

Candidate Name

The Republican Majority FundCategory/
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
12		20		2011

Transaction ID : 34146445

Amount of Each Disbursement this Period

2500.00

Contribution to Federal PAC

Full Name (Last, First, Middle Initial)

B. Strategy PAC

Mailing Address 1737 H St. NW

City	State	Zip Code
Washington	DC	20006

Purpose of Disbursement
Void - Strategy PAC

011

Candidate Name

Category/
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
12		20		2011

Transaction ID : 34146506

Amount of Each Disbursement this Period

-2500.00

Void - Strategy PAC

Full Name (Last, First, Middle Initial)

C. Strategy PAC

Mailing Address 1737 H St. NW

City	State	Zip Code
Washington	DC	20006

Purpose of Disbursement
Contribution to Federal PAC

011

Candidate Name

Category/
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
12		20		2011

Transaction ID : 34146508

Amount of Each Disbursement this Period

2500.00

Contribution to Federal PAC

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

2500.00

152500.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. Committee to Elect Thom Tillis

Mailing Address PO Box 488

City	State	Zip Code
Cornelius	NC	28031

Purpose of Disbursement
Thom Tillis, STATE HOUSE 98th NC

Candidate Name

NC Rep. Thom TillisOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2012
☐ Primary ☒ General
☐ Other (specify) ▼

State: NC District: 98

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	27	/	2011

Transaction ID : 33811324

Amount of Each Disbursement this Period

2000.00

Thom Tillis, STATE HOUSE 98th NC

Full Name (Last, First, Middle Initial)

B. Keep State Representative Jeff Greer

Mailing Address 2125 Hwy 79

City	State	Zip Code
Brandenburg	KY	40108

Purpose of Disbursement
Jeff Greer, STATE HOUSE 27th KY

Candidate Name

KY Rep. Jeff GreerOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: KY District: 27

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	07	/	2011

Transaction ID : 33863919

Amount of Each Disbursement this Period

500.00

Jeff Greer, STATE HOUSE 27th KY

Full Name (Last, First, Middle Initial)

C. Julie Denton for Kentucky State Senate

Mailing Address 1708 Golden Leaf Way

City	State	Zip Code
Louisville	KY	40245

Purpose of Disbursement
Julie Denton, STATE SENATE 36th KY

Candidate Name

Senator Julie DentonOffice Sought: ☐ House
☒ Senate
☐ PresidentDisbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: KY District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	07	/	2011

Transaction ID : 33863920

Amount of Each Disbursement this Period

500.00

Julie Denton, STATE SENATE 36th KY

SUBTOTAL of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

3000.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. Thompson for State Representative

Mailing Address PO Box 458

City	State	Zip Code
Owensboro	KY	42302

Purpose of Disbursement
Tommy Thompson, STATE HOUSE 14th KY

Candidate Name

KY Rep. Tommy Thompson

Office Sought:	Disbursement For: 2012
<input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

State: KY District: 14

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		07		2011

Transaction ID : 33863921

Amount of Each Disbursement this Period

500.00

Tommy Thompson, STATE HOUSE 14th KY

Full Name (Last, First, Middle Initial)

B. Committee to Elect Jean White

Mailing Address 324 Coronado Place

City	State	Zip Code
Hayden	CO	81639

Purpose of Disbursement
Jean White, STATE SENATE 8th CO

Candidate Name

CO Sen. Jean White

Office Sought:	Disbursement For: 2012
<input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

State: CO District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		07		2011

Transaction ID : 33863926

Amount of Each Disbursement this Period

200.00

Jean White, STATE SENATE 8th CO

Full Name (Last, First, Middle Initial)

C. Committee to Elect Libby Szabo

Mailing Address PO Box 746048

City	State	Zip Code
Arvda	CO	80006

Purpose of Disbursement
Libby Szabo, STATE HOUSE 27th CO

Candidate Name

CO Rep. Libby Szabo

Office Sought:	Disbursement For: 2012
<input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

State: CO District: 27

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		07		2011

Transaction ID : 33863928

Amount of Each Disbursement this Period

200.00

Libby Szabo, STATE HOUSE 27th CO

SUBTOTAL of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

900.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. Committee to Elect Mark Waller

Mailing Address 6535 Campfire Ct.

City	State	Zip Code
Colorado Springs	CO	80922

Purpose of Disbursement
Mark Waller, STATE HOUSE 15th CO

Candidate Name

CO Rep. Mark Waller

Office Sought:	Disbursement For: 2012
<input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

State: CO District: 15

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		07		2011

Transaction ID : 33863930

Amount of Each Disbursement this Period

200.00

Mark Waller, STATE HOUSE 15th CO

Full Name (Last, First, Middle Initial)

B. Committee to Elect Keith Swerdfefer

Mailing Address PO Box 6913

City	State	Zip Code
Pueblo West	CO	81007

Purpose of Disbursement
Keith Swerdfefer, STATE HOUSE 47th CO

Candidate Name

CO Rep. Keith Swerdfefer

Office Sought:	Disbursement For: 2012
<input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

State: CO District: 47

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		07		2011

Transaction ID : 33863932

Amount of Each Disbursement this Period

200.00

Keith Swerdfefer, STATE HOUSE 47th CO

Full Name (Last, First, Middle Initial)

C. Committee to Elect Angela Williams

Mailing Address 2235 Verbena St.

City	State	Zip Code
Denver	CO	80238

Purpose of Disbursement
Angela Williams, STATE HOUSE 7th CO

Candidate Name

CO Rep. Angela Williams

Office Sought:	Disbursement For: 2012
<input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

State: CO District: 07

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		07		2011

Transaction ID : 33863934

Amount of Each Disbursement this Period

200.00

Angela Williams, STATE HOUSE 7th CO

SUBTOTAL of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

600.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. The Committee to Elect Amy Stephens

Mailing Address 1061 Hummingbird Count

City	State	Zip Code
Colorado Springs	CO	80921

Purpose of Disbursement
Amy Stephens, STATE HOUSE 20th CO

Candidate Name

CO Rep. Amy Stephens

Office Sought:	Disbursement For: 2012
<input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

State: CO District: 20

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		07		2011

Transaction ID : 33863936

Amount of Each Disbursement this Period

200.00

Amy Stephens, STATE HOUSE 20th CO

Full Name (Last, First, Middle Initial)

B. Committee to Elect Jerry Sonnenberg

Mailing Address 4465 Country Road 63

City	State	Zip Code
Sterling	CO	80751

Purpose of Disbursement
Jerry Sonnenberg, STATE HOUSE 65th CO

Candidate Name

CO Rep. Jerry Sonnenberg

Office Sought:	Disbursement For: 2012
<input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

State: CO District: 65

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		07		2011

Transaction ID : 33863938

Amount of Each Disbursement this Period

200.00

Jerry Sonnenberg, STATE HOUSE 65th CO

Full Name (Last, First, Middle Initial)

C. Committee to Elect Ken Summers

Mailing Address PO Box 27301

City	State	Zip Code
Lakewood	CO	80227

Purpose of Disbursement
Ken Summers, STATE HOUSE 22nd CO

Candidate Name

CO Rep. Ken Summers

Office Sought:	Disbursement For: 2012
<input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

State: CO District: 22

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		07		2011

Transaction ID : 33863941

Amount of Each Disbursement this Period

200.00

Ken Summers, STATE HOUSE 22nd CO

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

600.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. Committee to Elect Spencer Swalm

Mailing Address 7250 S. Ivy Court

City	State	Zip Code
Centennial	CO	80112

Purpose of Disbursement
Spencer Swalm, STATE HOUSE 37th CO

Candidate Name

CO Rep. Spencer SwalmOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2012
☐ Primary ☒ General
☐ Other (specify) ▼

State: CO District: 37

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		08		2011

Transaction ID : 33863985

Amount of Each Disbursement this Period

200.00

Spencer Swalm, STATE HOUSE 37th CO

Full Name (Last, First, Middle Initial)

B. Committee to Elect Sue Schafer

Mailing Address 4030 Reed Street

City	State	Zip Code
Wheatridge	CO	80033

Purpose of Disbursement
Sue Schafer, STATE HOUSE 24th CO

Candidate Name

CO Rep. Sue SchaferOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2012
☐ Primary ☒ General
☐ Other (specify) ▼

State: CO District: 24

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		08		2011

Transaction ID : 33863987

Amount of Each Disbursement this Period

200.00

Sue Schafer, STATE HOUSE 24th CO

Full Name (Last, First, Middle Initial)

C. Committee to Elect Ellen Roberts

Mailing Address P.O. Box 3373

City	State	Zip Code
Burango	CO	81302

Purpose of Disbursement
Ellen Roberts, STATE HOUSE 59th CO

Candidate Name

CO Rep. Ellen RobertsOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2012
☐ Primary ☒ General
☐ Other (specify) ▼

State: CO District: 59

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		08		2011

Transaction ID : 33863990

Amount of Each Disbursement this Period

200.00

Ellen Roberts, STATE HOUSE 59th CO

SUBTOTAL of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

600.00

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	21b		22		23		24		25		26
	27		28a		28b		28c		X 29		30b

UnitedHealth Group Incorporated PAC (United for Health)

A. Committee to Elect Kevin Priola

Date of Disbursement

Transaction ID : 33863993

011

Amount of Each Disbursement this Period

Category/
Type

Kevin Priola, STATE HOUSE 30th CO

Full Name (Last, First, Middle Initial)

B. Committee to Elect Cheri Gerou

Date of Disbursement

Mailing Address 3064 Whitman Drive

City	State	Zip Code
Evergreen	CO	80439

Transaction ID : 33863997

Purpose of Disbursement
Cheri Gerou, STATE HOUSE 25th CO

011

Amount of Each Disbursement this Period

200.00

Candidate Name

Category/
Type

Office Sought:	<input checked="" type="checkbox"/> House	Disbursement For: 2012
	<input type="checkbox"/> Senate	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
	<input type="checkbox"/> President	<input type="checkbox"/> Other (specify) ▼

Cheri Gerou, STATE HOUSE 25th CO

State: CO District: 25

Full Name (Last, First, Middle Initial)
C. Committee to Elect Frank McNulty

Date of Disbursement

Three 7-segment displays are shown, each with a different number of segments lit. The first display shows '10', the second shows '08', and the third shows '2011'. The displays are arranged horizontally and separated by slashes.

Mailing Address 6642 Tiger Tooth

City	State	Zip Code
Littleton	CO	80124

Transaction ID : 33864000

Purpose of Disbursement
Frank McNulty, STATE HOUSE 43rd CO

011

Amount of Each Disbursement this Period

200.00

Candidate Name

Category/
Type

Office Sought:	<input checked="" type="checkbox"/> House	Disbursement For: 2012	<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> General
	<input type="checkbox"/> Senate		<input type="checkbox"/> Other (specify) ▼	
	<input type="checkbox"/> President			

Frank McNulty, STATE HOUSE 43rd CO

State: CO District: 43

SUBTOTAL of Disbursements This Page (optional).....

600.00

TOTAL This Period (last page this line number only).....

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. Committee to Elect Don Coram

Mailing Address 67850 Ogden Rd

City	State	Zip Code
Montrose	CO	81401

Purpose of Disbursement
Donald Coram, STATE HOUSE 58th CO

Candidate Name

CO Rep. Donald Coram

Office Sought:	Disbursement For: 2012
<input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

State: CO District: 58

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		08		2011

Transaction ID : 33864003

Amount of Each Disbursement this Period

200.00

Donald Coram, STATE HOUSE 58th CO

Full Name (Last, First, Middle Initial)

B. Committee to Elect Brian DelGrossoMailing Address 1437 N. Denver Ave.
#281

City	State	Zip Code
Loveland	CO	80535

Purpose of Disbursement
Brian Delgrosso, STATE HOUSE 51st CO

Candidate Name

CO Rep. Brian Delgrosso

Office Sought:	Disbursement For: 2012
<input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

State: CO District: 51

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		08		2011

Transaction ID : 33864005

Amount of Each Disbursement this Period

200.00

Brian Delgrosso, STATE HOUSE 51st CO

Full Name (Last, First, Middle Initial)

C. Committee to Elect Bob Gardner

Mailing Address 60 Mobray Ct.

City	State	Zip Code
Colorado Springs	CO	80906

Purpose of Disbursement
Bob Gardner, STATE HOUSE 21st CO

Candidate Name

CO Rep. Bob Gardner

Office Sought:	Disbursement For: 2012
<input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

State: CO District: 21

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		08		2011

Transaction ID : 33864007

Amount of Each Disbursement this Period

200.00

Bob Gardner, STATE HOUSE 21st CO

SUBTOTAL of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

600.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
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(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. Committee to Elect Jon Becker

Mailing Address 17272 Rd. P

City	State	Zip Code
Fort Morgan	CO	80701

Purpose of Disbursement
Jon Becker, STATE HOUSE 63rd CO

Candidate Name

CO Rep. Jon BeckerOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2012
☐ Primary ☒ General
☐ Other (specify) ▼

State: CO District: 63

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		08		2011

Transaction ID : 33864010

Amount of Each Disbursement this Period

200.00

Jon Becker, STATE HOUSE 63rd CO

Full Name (Last, First, Middle Initial)

B. Committee to Elect Mark BarkerMailing Address 1670-F East Cheyenne Mtn. Blvd
#313

City	State	Zip Code
Colorado Springs	CO	80906

Purpose of Disbursement
Mark Barker, STATE HOUSE 17th CO

Candidate Name

CO Rep. Mark BarkerOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2012
☐ Primary ☒ General
☐ Other (specify) ▼

State: CO District: 17

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		08		2011

Transaction ID : 33864012

Amount of Each Disbursement this Period

200.00

Mark Barker, STATE HOUSE 17th CO

Full Name (Last, First, Middle Initial)

C. Committee to Elect J. Paul Brown

Mailing Address PO Box 178

City	State	Zip Code
Ignacio	CO	81137

Purpose of Disbursement
J. Paul Brown, STATE HOUSE 59th CO

Candidate Name

CO Rep. J. Paul BrownOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2012
☐ Primary ☒ General
☐ Other (specify) ▼

State: CO District: 59

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		10		2011

Transaction ID : 33864085

Amount of Each Disbursement this Period

200.00

J. Paul Brown, STATE HOUSE 59th CO

SUBTOTAL of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

600.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
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Detailed Summary PageFOR LINE NUMBER:
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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. United for Health PAC of Tennessee

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		17		2011

Mailing Address 9900 Bren Road East

Transaction ID : 33923815

City	State	Zip Code
Minnetonka	MN	55343

Amount of Each Disbursement this Period

Purpose of Disbursement

011

Candidate Name

Category/
Type

4000.00

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State: District:

Full Name (Last, First, Middle Initial)

B. Committee to Elect Earl Ray Tomblin 2011

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		26		2011

Mailing Address PO Box 11530

Transaction ID : 33943724

City	State	Zip Code
Charleston	WV	25339

Amount of Each Disbursement this Period

Purpose of Disbursement
Earl Ray Tomblin, GOVERNOR WV

011

Candidate Name

Category/
Type

1000.00

Mr. Earl Ray Tomblin

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2011

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input checked="" type="checkbox"/> Other (specify) ▼	

State: District: Special-General2011

Full Name (Last, First, Middle Initial)

C. Dockham for State Representative

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		14		2011

Mailing Address PO Box 265

Transaction ID : 33994277

City	State	Zip Code
Denton	NC	27239

Amount of Each Disbursement this Period

Purpose of Disbursement
Jerry Dockham, STATE HOUSE 80th NC

011

Candidate Name

Category/
Type

1000.00

Representa Jerry Dockham

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2012

<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State: NC District: 80

Jerry Dockham, STATE HOUSE 80th NC

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

6000.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. Tom Apodaca for State Senate

Mailing Address 1504 Fifth Avenue West

City	State	Zip Code
Hendersonville	NC	28739

Purpose of Disbursement
Tom Apodaca, STATE SENATE 48th NC

Candidate Name

NC Sen. Tom ApodacaOffice Sought: ☐ House
☒ Senate
☐ PresidentDisbursement For: 2012
☐ Primary ☒ General
☐ Other (specify) ▼

State: NC District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	14	/	2011

Transaction ID : 33994278

Amount of Each Disbursement this Period

1000.00

Tom Apodaca, STATE SENATE 48th NC

Full Name (Last, First, Middle Initial)

B. Phil Berger for State Senate

Mailing Address PO Box 1309

City	State	Zip Code
Eden	NC	27289

Purpose of Disbursement
Philip Berger, STATE SENATE 26th NC

Candidate Name

Senator Philip BergerOffice Sought: ☐ House
☒ Senate
☐ PresidentDisbursement For: 2012
☐ Primary ☒ General
☐ Other (specify) ▼

State: NC District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	14	/	2011

Transaction ID : 33994279

Amount of Each Disbursement this Period

2000.00

Philip Berger, STATE SENATE 26th NC

Full Name (Last, First, Middle Initial)

C. UnitedHealth Group Inc PAC of PA

Mailing Address 9900 Bren Road East

City	State	Zip Code
Minnetonka	MN	55343

Purpose of Disbursement
Contribution to State PAC

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	14	/	2011

Transaction ID : 33994281

Amount of Each Disbursement this Period

10000.00

Contribution to State PAC

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

13000.00

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SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
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(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. United for Health of Texas (UnitedHealth Group Inc, PAC of Texas)

Mailing Address 9900 Bren Road East

City	State	Zip Code
Minnetonka	MN	55343

Purpose of Disbursement
Transfer to TX PAC

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		14		2011

Transaction ID : 33994282

Amount of Each Disbursement this Period

22000.00

Transfer to TX PAC

Full Name (Last, First, Middle Initial)

B. Committee to Elect Jeffrey Kessler

Mailing Address 607 Wheeling Ave.

City	State	Zip Code
Glen Dale	WV	26038

Purpose of Disbursement
Jeffrey Kessler, STATE SENATE 2nd WV

Candidate Name

Senator Jeffrey Kessler

Office Sought:	<input type="checkbox"/> House
	<input checked="" type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	2012	<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
		<input type="checkbox"/> Other (specify) ▼	

State: WV District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		14		2011

Transaction ID : 33994283

Amount of Each Disbursement this Period

250.00

Jeffrey Kessler, STATE SENATE 2nd WV

Full Name (Last, First, Middle Initial)

C. Committee to Elect Harry Keith White

Mailing Address PO Box 1985

City	State	Zip Code
Gilbert	WV	25621

Purpose of Disbursement
Harry White, STATE HOUSE 21st WV

Candidate Name

Delegate Harry White

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	2012	<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
		<input type="checkbox"/> Other (specify) ▼	

State: WV District: 21

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		14		2011

Transaction ID : 33994286

Amount of Each Disbursement this Period

250.00

Harry White, STATE HOUSE 21st WV

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

22500.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. Committee to Elect David Perry

Mailing Address 330 East Martin Avenue

City	State	Zip Code
Oak Hill	WV	25901

Purpose of Disbursement
David Perry, STATE HOUSE 29th WV

Candidate Name

Delegate David PerryOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: WV District: 29

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		14		2011

Transaction ID : 33994287

Amount of Each Disbursement this Period

250.00

David Perry, STATE HOUSE 29th WV

Full Name (Last, First, Middle Initial)

B. Committee to Elect Doug Facemire

Mailing Address 774 West Shannon Road

City	State	Zip Code
Oak Hill	WV	25901

Purpose of Disbursement
Douglas Facemire, STATE SENATE 12th WV

Candidate Name

WV Sen. Douglas FacemireOffice Sought: ☐ House
☒ Senate
☐ PresidentDisbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: WV District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		14		2011

Transaction ID : 33994288

Amount of Each Disbursement this Period

250.00

Douglas Facemire, STATE SENATE 12th WV

Full Name (Last, First, Middle Initial)

C. Kentucky Senate Republican Caucus Campaign Committee

Mailing Address 2032 Von List Way

City	State	Zip Code
Lexington	KY	40502

Purpose of Disbursement
Contribution to State Party Committee

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		14		2011

Transaction ID : 33994289

Amount of Each Disbursement this Period

1500.00

Contribution to State Party Committee

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

2000.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. Kentucky House Democratic Caucus Campaign Committee

Mailing Address PO Box 4204

City	State	Zip Code
Frankfort	KY	40604

Purpose of Disbursement
Contribution to State Party Committee

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		14		2011

Transaction ID : 33994290

Amount of Each Disbursement this Period

1500.00

Contribution to State Party Committee

Full Name (Last, First, Middle Initial)

B. Keep State Representative Jeff Greer

Mailing Address 2125 Hwy 79

City	State	Zip Code
Brandenburg	KY	40108

Purpose of Disbursement
Jeff Greer, STATE HOUSE 27th KY

Candidate Name

KY Rep. Jeff Greer

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	2012	<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
		<input type="checkbox"/> Other (specify) ▼	

State: KY District: 27

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		16		2011

Transaction ID : 33997629

Amount of Each Disbursement this Period

500.00

Jeff Greer, STATE HOUSE 27th KY

Full Name (Last, First, Middle Initial)

C. Tom Buford for Senate

Mailing Address 409 W Maple Street

City	State	Zip Code
Nicholasville	KY	40356

Purpose of Disbursement
Tom Buford, STATE SENATE 22nd KY

Candidate Name

Senator Tom Buford

Office Sought:	<input type="checkbox"/> House
	<input checked="" type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	2012	<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
		<input type="checkbox"/> Other (specify) ▼	

State: KY District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		16		2011

Transaction ID : 33997639

Amount of Each Disbursement this Period

1000.00

Tom Buford, STATE SENATE 22nd KY

SUBTOTAL of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

3000.00

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SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. Gregory D. Stumbo for the House

Mailing Address PO Box 1473

City	State	Zip Code
Prestonburg	KY	41653

Purpose of Disbursement
Greg Stumbo, STATE HOUSE 95th KY

Candidate Name

KY Rep. Greg StumboOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: KY District: 95

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	16	/	2011

Transaction ID : 33997640

Amount of Each Disbursement this Period

1000.00

Greg Stumbo, STATE HOUSE 95th KY

Full Name (Last, First, Middle Initial)

B. Rocky Adkins for House of Representatives

Mailing Address PO Box 688

City	State	Zip Code
Sandy Hook	KY	41171

Purpose of Disbursement
Rocky Adkins, STATE HOUSE 99th KY

Candidate Name

Representa Rocky AdkinsOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: KY District: 99

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	16	/	2011

Transaction ID : 33997641

Amount of Each Disbursement this Period

500.00

Rocky Adkins, STATE HOUSE 99th KY

Full Name (Last, First, Middle Initial)

C. Joe Fischer for House of Representatives

Mailing Address 126 Dixie Place

City	State	Zip Code
Sandy Hook	KY	41171

Purpose of Disbursement
Joseph Fischer, STATE HOUSE 68th KY

Candidate Name

Representa Joseph FischerOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: KY District: 68

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	16	/	2011

Transaction ID : 33997644

Amount of Each Disbursement this Period

500.00

Joseph Fischer, STATE HOUSE 68th KY

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

2000.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. Committee to Elect Lynn Wachtmann

Mailing Address 550 Euclid Ave.

City Napoleon	State OH	Zip Code 43545
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Purpose of Disbursement
Lynn Wachtmann, STATE HOUSE 75th OH

Candidate Name

OH Rep. Lynn WachtmannOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: OH District: 75

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	19	/	2011

Transaction ID : 34022216

Amount of Each Disbursement this Period

750.00

Lynn Wachtmann, STATE HOUSE 75th OH

Full Name (Last, First, Middle Initial)

B. Friends of Faber

Mailing Address 7706 St. Rt 703

City Celina	State OH	Zip Code 45822
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Purpose of Disbursement
Keith Faber, STATE SENATE 12th OH

Candidate Name

OH Sen. Keith FaberOffice Sought: ☐ House
☒ Senate
☐ PresidentDisbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: OH District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	19	/	2011

Transaction ID : 34022217

Amount of Each Disbursement this Period

750.00

Keith Faber, STATE SENATE 12th OH

Full Name (Last, First, Middle Initial)

C. Citizens for Hottinger

Mailing Address 386 Sabrecutte Dr.

City Newark	State OH	Zip Code 43055
----------------	-------------	-------------------

Purpose of Disbursement
Jay Hottinger, STATE HOUSE 71st OH

Candidate Name

OH Rep. Jay HottingerOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: OH District: 71

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	19	/	2011

Transaction ID : 34022218

Amount of Each Disbursement this Period

750.00

Jay Hottinger, STATE HOUSE 71st OH

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

2250.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
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Detailed Summary PageFOR LINE NUMBER:
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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. Matt Huffman for State Representative

Mailing Address 2220 Merit Drive

City	State	Zip Code
Lima	OH	45805

Purpose of Disbursement
Matt Huffman, STATE HOUSE 4th OH

Candidate Name

OH Rep. Matt HuffmanOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: OH District: 04

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		19		2011

Transaction ID : 34022219

Amount of Each Disbursement this Period

750.00

Matt Huffman, STATE HOUSE 4th OH

Full Name (Last, First, Middle Initial)

B. Dave Daniels for State Senate

Mailing Address 440 North Street

City	State	Zip Code
Greenfield	OH	45123

Purpose of Disbursement
David Daniels, STATE SENATE 17th OH

Candidate Name

OH Sen. David DanielsOffice Sought: ☐ House
☒ Senate
☐ PresidentDisbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: OH District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		19		2011

Transaction ID : 34022220

Amount of Each Disbursement this Period

500.00

David Daniels, STATE SENATE 17th OH

Full Name (Last, First, Middle Initial)

C. Friends of Shannon Jones

Mailing Address 800 Valley View Point

City	State	Zip Code
Springboro	OH	45066

Purpose of Disbursement
Shannon Jones, STATE HOUSE 67th OH

Candidate Name

OH Rep. Shannon JonesOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: OH District: 67

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		19		2011

Transaction ID : 34022221

Amount of Each Disbursement this Period

750.00

Shannon Jones, STATE HOUSE 67th OH

SUBTOTAL of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

2000.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. Team Burke

Mailing Address 275 W. 4th Street

City	State	Zip Code
Marysville	OH	43040

Purpose of Disbursement
Dave Burke, STATE HOUSE 83rd OH

Candidate Name

OH Rep. Dave BurkeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: OH District: 83

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		19		2011

Transaction ID : 34022222

Amount of Each Disbursement this Period

500.00

Dave Burke, STATE HOUSE 83rd OH

Full Name (Last, First, Middle Initial)

B. UnitedHealth Group Inc Political Action Committee of Iowa

Mailing Address 9900 Bren Road East

City	State	Zip Code
Minnetonka	MN	55343

Purpose of Disbursement
Contribution to State PAC

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		19		2011

Transaction ID : 34022223

Amount of Each Disbursement this Period

4500.00

Contribution to State PAC

Full Name (Last, First, Middle Initial)

C. United for Health PAC of Tennessee

Mailing Address 9900 Bren Road East

City	State	Zip Code
Minnetonka	MN	55343

Purpose of Disbursement
Contribution to State PAC

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		19		2011

Transaction ID : 34022224

Amount of Each Disbursement this Period

6000.00

Contribution to State PAC

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

11000.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
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Detailed Summary PageFOR LINE NUMBER:
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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. Shooter for Senate

Mailing Address 1341 W. 17th Place

City Yuma	State AZ	Zip Code 85364
--------------	-------------	-------------------

Purpose of Disbursement
Don Shooter, STATE SENATE 24th AZ

Candidate Name

AZ Sen. Don ShooterOffice Sought: ☐ House
☒ Senate
☐ PresidentDisbursement For: 2011
☒ Primary ☐ General
☐ Other (specify) ▼

State: AZ District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		19		2011

Transaction ID : 34022236

Amount of Each Disbursement this Period

300.00

Don Shooter, STATE SENATE 24th AZ

Full Name (Last, First, Middle Initial)

B. Committee to Elect Nancy McLain

Mailing Address 1706 Marble Canyon Drive

City Bullhead City	State AZ	Zip Code 86442
-----------------------	-------------	-------------------

Purpose of Disbursement
Nancy McLain, STATE HOUSE 3rd AZ

Candidate Name

AZ Rep. Nancy McLainOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2011
☒ Primary ☐ General
☐ Other (specify) ▼

State: AZ District: 03

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		19		2011

Transaction ID : 34022248

Amount of Each Disbursement this Period

324.00

Nancy McLain, STATE HOUSE 3rd AZ

Full Name (Last, First, Middle Initial)

C. Friends of David Ige

Mailing Address 988-635 Kaahele Street

City Aiea	State HI	Zip Code 96701
--------------	-------------	-------------------

Purpose of Disbursement
David Ige, STATE SENATE 16th HI

Candidate Name

Senator David IgeOffice Sought: ☐ House
☒ Senate
☐ PresidentDisbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: HI District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		19		2011

Transaction ID : 34022258

Amount of Each Disbursement this Period

500.00

David Ige, STATE SENATE 16th HI

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1124.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
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(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. Friends of Suzanne Chun-Oakland

Mailing Address PO Box 4354

City	State	Zip Code
Kaneohe	HI	96744

Purpose of Disbursement
Suzanne Chun-Oakland, STATE SENATE 13th HI

Candidate Name

HI Sen. Suzanne Chun-OaklandOffice Sought: ☐ House
☒ Senate
☐ PresidentDisbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: HI District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	19	/	2011

Transaction ID : 34022259

Amount of Each Disbursement this Period

1000.00

Suzanne Chun-Oakland, STATE SENATE 13th HI

Full Name (Last, First, Middle Initial)

B. Friends of Robert Herkes

Mailing Address PO Box 313

City	State	Zip Code
Volcano	HI	96785

Purpose of Disbursement
Robert Herkes, STATE HOUSE 5th HI

Candidate Name

HI Rep. Robert HerkesOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: HI District: 05

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	19	/	2011

Transaction ID : 34022260

Amount of Each Disbursement this Period

500.00

Robert Herkes, STATE HOUSE 5th HI

Full Name (Last, First, Middle Initial)

C. Friends of Rosalyn Baker

Mailing Address PO Box 10394

City	State	Zip Code
Lahaina	HI	96761-0394

Purpose of Disbursement
Rosalyn Baker, STATE SENATE 5th HI

Candidate Name

HI Sen. Rosalyn BakerOffice Sought: ☐ House
☒ Senate
☐ PresidentDisbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: HI District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	19	/	2011

Transaction ID : 34022261

Amount of Each Disbursement this Period

500.00

Rosalyn Baker, STATE SENATE 5th HI

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

2000.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. Janet Cowell for NC State Treasurer

Mailing Address PO Box 10333

City	State	Zip Code
Raleigh	NC	27605

Purpose of Disbursement
Janet Cowell, TREASURER NC

Candidate Name

Janet CowellOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2012
☐ Primary ☒ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		22		2011

Transaction ID : 34024558

Amount of Each Disbursement this Period

1000.00

Janet Cowell, TREASURER NC

Full Name (Last, First, Middle Initial)

B. Wayne Goodwin for NC Insurance Commissioner

Mailing Address P.O. Box 27841

City	State	Zip Code
Raleigh	NC	27611

Purpose of Disbursement
Wayne Goodwin, COMM. OF INSURANCE NC

Candidate Name

Wayne GoodwinOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2012
☐ Primary ☒ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		22		2011

Transaction ID : 34024580

Amount of Each Disbursement this Period

1000.00

Wayne Goodwin, COMM. OF INSURANCE NC

Full Name (Last, First, Middle Initial)

C. Committee to Elect Gail Haines

Mailing Address PO Box 301085

City	State	Zip Code
Waterford	MI	48330

Purpose of Disbursement
Gail Haines, STATE HOUSE 43rd MI

Candidate Name

MI Rep. Gail HainesOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2012
☐ Primary ☒ General
☐ Other (specify) ▼

State: MI District: 43

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		27		2011

Transaction ID : 34038182

Amount of Each Disbursement this Period

250.00

Gail Haines, STATE HOUSE 43rd MI

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

2250.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
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Detailed Summary PageFOR LINE NUMBER:
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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. Committee to Elect Matt Lori State Representative

Mailing Address 14941 Roberts Shores Dr.

City Constantine	State MI	Zip Code 49042
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Purpose of Disbursement
Matt Lori, STATE HOUSE 59th MI

Candidate Name

MI Rep. Matt LoriOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2012
☐ Primary ☒ General
☐ Other (specify) ▼

State: MI District: 59

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		27		2011

Transaction ID : 34038183

Amount of Each Disbursement this Period

250.00

Matt Lori, STATE HOUSE 59th MI

Full Name (Last, First, Middle Initial)

B. Judy Emmons for State Senate

Mailing Address 506 E Carson City Rd

City Sheridan	State MI	Zip Code 48884
------------------	-------------	-------------------

Purpose of Disbursement
Judy Emmons, STATE SENATE 33rd MI

Candidate Name

MI Sen. Judy EmmonsOffice Sought: ☐ House
☒ Senate
☐ PresidentDisbursement For: 2014
☒ Primary ☐ General
☐ Other (specify) ▼

State: MI District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		27		2011

Transaction ID : 34038184

Amount of Each Disbursement this Period

500.00

Judy Emmons, STATE SENATE 33rd MI

Full Name (Last, First, Middle Initial)

C. Rick Jones for State Senate

Mailing Address PO Box 115

City Grand Ledge	State MI	Zip Code 48837
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Purpose of Disbursement
Rick Jones, STATE SENATE 24th MI

Candidate Name

MI Sen. Rick JonesOffice Sought: ☐ House
☒ Senate
☐ PresidentDisbursement For: 2014
☒ Primary ☐ General
☐ Other (specify) ▼

State: MI District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		27		2011

Transaction ID : 34038185

Amount of Each Disbursement this Period

500.00

Rick Jones, STATE SENATE 24th MI

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1250.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. Arlan B. Meekhof for State Senate

Mailing Address 9128 Oak Creek Ln

City
West OliveState
MIZip Code
49460Purpose of Disbursement
Arlan Meekhof, STATE SENATE 30th MI

011

Candidate Name

MI Sen. Arlan MeekhofCategory/
TypeOffice Sought: ☐ House
☒ Senate
☐ PresidentDisbursement For: 2014
☒ Primary ☐ General
☐ Other (specify) ▼

State: MI District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		27		2011

Transaction ID : 34038186

Amount of Each Disbursement this Period

500.00

Arlan Meekhof, STATE SENATE 30th MI

Full Name (Last, First, Middle Initial)

B. Pete Lund for State Representative

Mailing Address 6881 Muirfield Dr.

City
Shelby Twp.State
MIZip Code
48316Purpose of Disbursement
Pete Lund, STATE HOUSE 36th MI

011

Candidate Name

MI Rep. Pete LundCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2012
☐ Primary ☒ General
☐ Other (specify) ▼

State: MI District: 36

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		27		2011

Transaction ID : 34038187

Amount of Each Disbursement this Period

250.00

Pete Lund, STATE HOUSE 36th MI

Full Name (Last, First, Middle Initial)

C. Jim Marleau for State Senate

Mailing Address 3181 Sandoval

City
Lake OrionState
MIZip Code
48360Purpose of Disbursement
Jim Marleau, STATE SENATE 12th MI

011

Candidate Name

MI Sen. Jim MarleauCategory/
TypeOffice Sought: ☐ House
☒ Senate
☐ PresidentDisbursement For: 2014
☒ Primary ☐ General
☐ Other (specify) ▼

State: MI District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		27		2011

Transaction ID : 34038188

Amount of Each Disbursement this Period

500.00

Jim Marleau, STATE SENATE 12th MI

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1250.00

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SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
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(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. Committee to Elect Mike Shirkey

Mailing Address 11757 Sutfin Rd.

City	State	Zip Code
Clarklake	MI	49234

Purpose of Disbursement
Mike Shirkey, STATE HOUSE 65th MI

Candidate Name

MI Rep. Mike ShirkeyOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2012
☐ Primary ☒ General
☐ Other (specify) ▼

State: MI District: 65

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		27		2011

Transaction ID : 34038189

Amount of Each Disbursement this Period

500.00

Mike Shirkey, STATE HOUSE 65th MI

Full Name (Last, First, Middle Initial)

B. Mike Callton for State Rep

Mailing Address PO Box 676

City	State	Zip Code
Nashville	MI	49073-0000

Purpose of Disbursement
Mike Callton, STATE HOUSE 87th MI

Candidate Name

MI Rep. Mike CalltonOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2012
☐ Primary ☒ General
☐ Other (specify) ▼

State: MI District: 87

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		27		2011

Transaction ID : 34038190

Amount of Each Disbursement this Period

500.00

Mike Callton, STATE HOUSE 87th MI

Full Name (Last, First, Middle Initial)

C. Citizens for John Walsh

Mailing Address 35041 Pembroke

City	State	Zip Code
Livonia	MI	48152

Purpose of Disbursement
John Walsh, STATE HOUSE 19th MI

Candidate Name

MI Rep. John WalshOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2012
☐ Primary ☒ General
☐ Other (specify) ▼

State: MI District: 19

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		27		2011

Transaction ID : 34038191

Amount of Each Disbursement this Period

500.00

John Walsh, STATE HOUSE 19th MI

SUBTOTAL of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

1500.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
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Detailed Summary PageFOR LINE NUMBER:
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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. Paul Opsommer for State Representative

Mailing Address 315 E Main

City	State	Zip Code
Dewitt	MI	48820

Purpose of Disbursement
Paul Opsommer, STATE HOUSE 93rd MI

Candidate Name

MI Rep. Paul Opsommer

Office Sought:	Disbursement For: 2012
<input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

State: MI District: 93

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		27		2011

Transaction ID : 34038192

Amount of Each Disbursement this Period

250.00

Paul Opsommer, STATE HOUSE 93rd MI

Full Name (Last, First, Middle Initial)

B. United for Health PAC of Tennessee

Mailing Address 9900 Bren Road East

City	State	Zip Code
Minnetonka	MN	55343

Purpose of Disbursement
Contribution to State PAC

Candidate Name

Office Sought:	Disbursement For:
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
12		04		2011

Transaction ID : 34068106

Amount of Each Disbursement this Period

6000.00

Contribution to State PAC

Full Name (Last, First, Middle Initial)

C. Friends of Michelle Kidani

Mailing Address PO Box 894515

City	State	Zip Code
Mililani	HI	96789

Purpose of Disbursement
Michelle Kidani, STATE SENATE 17th HI

Candidate Name

HI Sen. Michelle Kidani

Office Sought:	Disbursement For: 2012
<input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

State: HI District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
12		04		2011

Transaction ID : 34068107

Amount of Each Disbursement this Period

500.00

Michelle Kidani, STATE SENATE 17th HI

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

6750.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
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<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. Eddie Farnsworth 2012

Mailing Address 1126 E. Harrison St.

City
GilbertState
AZZip Code
85295Purpose of Disbursement
Eddie Farnsworth, STATE HOUSE 22nd AZ

Candidate Name

AZ Rep. Eddie FarnsworthOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2011
☒ Primary ☐ General
☐ Other (specify) ▼

State: AZ District: 22

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
12		17		2011

Transaction ID : 34122302

Amount of Each Disbursement this Period

250.00

Eddie Farnsworth, STATE HOUSE 22nd AZ

Full Name (Last, First, Middle Initial)

B. ReelectAndyBiggs.com

Mailing Address 10612 S. Greenfield Rd

City
GilbertState
AZZip Code
85234Purpose of Disbursement
Andy Biggs, STATE SENATE 22nd AZ

Candidate Name

AZ Sen. Andy BiggsOffice Sought: ☐ House
☒ Senate
☐ PresidentDisbursement For: 2011
☒ Primary ☐ General
☐ Other (specify) ▼

State: AZ District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
12		17		2011

Transaction ID : 34122303

Amount of Each Disbursement this Period

300.00

Andy Biggs, STATE SENATE 22nd AZ

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
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Amount of Each Disbursement this Period

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SUBTOTAL of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

550.00

87924.00
